The Pause Room

DBT-informed skills for the next moment

Strong feelings can be real without deciding your next action. Practice creating space between an urge and a response.

1

S / Stop

Pause your action if safe. Put down the phone or stop speaking for a moment. Relax your hands.

2

T / Take a step back

Pause mentally or give yourself physical space. Take a few comfortable breaths without forcing or holding them.

3

O / Observe

Notice thoughts, feelings, body sensations, and surroundings. What are the facts? What do you feel an urge to do?

4

P / Proceed mindfully

Choose one next step that fits your values, your goal, and safety. If you remain overwhelmed, pause longer and seek support.

TRY IT IN REAL LIFE

An upsetting message arrives. You notice hurt and an urge to argue. Set the phone down, feel your feet, and separate the words you received from the meaning you added. Choose whether to ask a clear question later.

The Pause Room

Your practice page / Write, speak, or reflect privately

Find your wise mind

Ask: What am I feeling? What facts matter? What would be effective now? Try naming three things you see, two sounds, and one comfortable sensation. Adapt or stop if grounding increases distress.

01 My early body cue

02 The feeling and urge I notice

03 The facts I can observe

04 My pause phrase

05 My safe next step / support person

One thing I learned / One adjustment I will try

The Pause Room

Keep-close cards / Support, sources, and a next step

PAUSE

Stop. Step back. Observe. Proceed mindfully.

GROUND

Notice 3 things you see, 2 sounds, and 1 comfortable sensation.

WISE MIND

What am I feeling? What facts matter? What would help?

REPAIR

Own the action. Name its impact. Choose a specific change.

CARE & SAFETY

Safety comes before completing a skill. Keep children safely supervised during a break. If there are threats or abuse, prioritize safety and private professional support. This guide is not a complete DBT treatment program.

SOURCES & SCOPE

Linehan, DBT Skills Training Manual and Handouts (Guilford); VA DBT resources (va.gov); VA Tobacco & Nicotine Treatment Group Counseling Toolkit (mentalhealth.va.gov). Original educational paraphrases.

Original educational guide. Not therapy, a diagnosis, a detox plan, or a substitute for individualized care. Adapt practice with a qualified clinician. Reviewed for this collection: November 2026.

House of Mind™

The Thought Room

CBT-informed tools for a kinder perspective

Thoughts, feelings, body sensations, and actions influence one another. A convincing thought may still leave out part of the picture.

1

Notice the thought

Name the situation and your feeling. Try: I am noticing the thought that ___. Rate the feeling from 0 to 10 if useful.

2

Separate fact from meaning

Fact: They have not replied. Meaning I added: They do not care about me. Both are worth noticing; they are not the same thing.

3

Check the fuller picture

What supports the thought? What adds another perspective? Am I predicting, mind-reading, or using always or never?

4

Choose a fair thought and action

Aim for believable words, rather than forced positivity. Ask one clear question, take a manageable step, or seek support.

TRY IT IN REAL LIFE

Thought: I made a mistake, so I am a failure. Fairer view: I made a mistake. I can repair what I can and still have worth. Action: identify one repair and take it.

The Thought Room

Your practice page / Write, speak, or reflect privately

When thinking feels too hard

Orient to the room and give yourself a safe pause. Return to the thought record when you can focus. Feelings do not have to change immediately for practice to matter.

01 Situation / facts

02 My automatic thought and feeling (0-10)

03 Evidence for the thought

04 Evidence that adds perspective

05 A fairer thought and one helpful action

One thing I learned / One adjustment I will try

The Thought Room

Keep-close cards / Support, sources, and a next step

NOTICE

I am noticing the thought that ___. A thought can be examined.

CHECK

What facts support this? What facts add another perspective?

BE FAIR

What would I say to someone I care about?

CHOOSE

One believable thought. One manageable action.

CARE & SAFETY

Your thoughts do not cause another person to mistreat you. Do not reframe real threats as overreacting. Protect your notes if someone monitors them; prioritize safety and professional support.

SOURCES & SCOPE

NHS Every Mind Matters: Reframing unhelpful thoughts and Thought record (nhs.uk/every-mind-matters); VA National Center for PTSD: intimate partner violence (ptsd.va.gov).

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The Connection Room

Listen. Pause. Repair. Make room for each other.

Connection grows through repeated respectful actions. These practices are for relationships where both people can speak freely and safely.

1

Pause with a plan

Notice a tight jaw, louder voice, or urge to insult. Say: This matters. I need a break. Can we check back at 7:30?

2

Describe. Feel. Request.

Choose one specific concern. When plans change late, I feel overwhelmed. Could we decide earlier and share the cleanup?

3

Listen before solving

Reflect: What I hear is ___. Did I get it? Ask one curious question before sharing your view. Understanding does not require agreement.

4

Repair your part

I raised my voice. That was hurtful. I am sorry. Next time I will pause sooner. Follow an apology with a specific change; avoid but you made me.

TRY IT IN REAL LIFE

One partner wants an early dinner; the other works late. Each names the need underneath the preference. Agree on two workable options, try one for a week, and choose a time to review.

The Connection Room

Your practice page / Write, speak, or reflect privately

Small acts, real care

Try a short check-in and ten phone-free minutes when children are safely supervised. Share the work of noticing, planning, and finishing household tasks. Ask which kind of care feels welcome; no one owes affection, sex, money, or service.

01 Our early warning cues / pause phrase

02 Our check-back time or safe alternative

03 One specific concern and clear request

04 One task each person will own

05 Our connection time / review date

One thing I learned / One adjustment I will try

The Connection Room

Keep-close cards / Support, sources, and a next step

PAUSE

Take a safe calming break. Check back or clearly reschedule.

REQUEST

When ___ happens, I feel ___. Could we ___?

LISTEN

What I hear is ___. Did I understand?

REPAIR

Take responsibility without blame. Name one change you will make.

CARE & SAFETY

Threats, coercion, humiliation, monitoring, blocked exits, and fear of retaliation require private professional support before joint exercises. Never follow or corner a partner taking space. Safety takes priority over a promised return time.

SOURCES & SCOPE

The Gottman Institute: gentle start-up, listening, repair, and calming breaks (gottman.com); VA National Center for PTSD: intimate partner violence (ptsd.va.gov).

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The Courage Room

Social anxiety: small steps toward more choice

Fear of judgment can make avoidance feel relieving in the moment. Practice can help you learn what happens and what you can handle. The goal is choice, not becoming outgoing.

1

Name what feels difficult

Is it fear of judgment, panic, low mood, sensory overload, or something unsafe? These may need different support. Discuss the pattern with your clinician.

2

Choose a meaningful goal

Pick something you value: visiting a library, sharing an idea, or joining a short conversation. Your goal does not need to impress anyone.

3

Build a manageable ladder

List possible steps and rate anticipated difficulty from 0 to 10. Choose the order with a clinician. Keep needed accommodations and medical supports.

4

Practice and notice learning

Write a specific prediction, try your agreed step, then record what actually happened. Repeat or adjust. Anxiety does not need to reach zero.

TRY IT IN REAL LIFE

Goal: borrow a book. Possible steps: browse the library briefly, ask where a book is, then borrow it. Your own difficulty ratings determine the order. Plan transport, timing, and support that fit your needs.

The Courage Room

Your practice page / Write, speak, or reflect privately

In the anxious moment

Feel your feet or the chair supporting you. Breathe comfortably. Turn attention toward one detail in the conversation or room, rather than repeatedly checking how you look. Afterward, record facts instead of replaying every detail.

01 My meaningful goal

02 Three possible steps / difficulty (0-10)

03 My chosen step and support

04 My prediction: what exactly might happen?

05 What happened / what I learned / next step

One thing I learned / One adjustment I will try

The Courage Room

Keep-close cards / Support, sources, and a next step

CHOOSE

What would I like more room for in my life?

STEP

One manageable practice, chosen with support.

NOTICE

Turn attention toward the conversation or surroundings.

LEARN

What did I predict? What happened? What can I take forward?

CARE & SAFETY

No surprise outings, forced eye contact, or flooding. Practice should be chosen and manageable. Keep genuinely useful accommodations. Quietness and enjoying solitude are not disorders.

SOURCES & SCOPE

NICE CG159: Social anxiety disorder (nice.org.uk/guidance/cg159); NHS Every Mind Matters: CBT thought record (nhs.uk/every-mind-matters).

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The Next Step Room

Alcohol + cocaine: support for urges and safer choices

Recovery is more than willpower. Build a plan for the next urge, the next safe ride, and the next person you can call.

1 Pause and change the scene

If safe, move away from substances and purchasing opportunities. Keep your phone with you. Do not drive after using.

2 Delay and connect

Try a short delay, such as ten minutes, while contacting support. Say: I am having an urge and need company while it passes. Repeat or seek more help.

3 Notice the chain

Trigger leads to a thought, then an urge, then an action. Which places, people, emotions, or drinking situations lead toward cocaine use? Plan an exit before arriving.

4 Replace one link

Instead of I need a drink to cope, try: I need relief and support. I can call someone and leave this situation. Plan food, rest, support, and substance-free alternatives.

TRY IT IN REAL LIFE

After a stressful argument, an urge appears. Leave the setting if safe, call your support person, and use your prearranged sober ride. Later, review the trigger with your clinician without shaming yourself.

The Next Step Room

Your practice page / Write, speak, or reflect privately

Treatment that fits

Tell your clinician about both substances, timing, amounts, cravings, and what happens when you stop. Ask about CBT, motivational approaches, contingency management, and alcohol treatment options. Peer support can add connection; it does not replace medical assessment.

01 My main trigger / warning cue

02 My first alternative action

03 My support person and number

04 My sober ride and backup

05 My clinician / next visit / what to discuss

One thing I learned / One adjustment I will try

The Next Step Room

Keep-close cards / Support, sources, and a next step

PAUSE

Move away safely. Do not drive after using.

CONNECT

I am having an urge. Can you stay with me or help me leave?

PLAN

Name the trigger. Choose an exit and sober ride in advance.

RESTART

Review what happened. Contact support. Adjust the next step.

CARE & SAFETY

Alcohol plus cocaine adds heart and overdose risk; cocaine does not make driving safe. Heavy regular drinking can make sudden withdrawal dangerous: seek medical guidance before stopping. Call 911 for chest pain, seizure, collapse, severe overheating, trouble breathing, or inability to wake. Cocaine may contain fentanyl; if overdose is suspected, give naloxone if available, call 911, and follow dispatcher instructions. Naloxone does not treat cocaine or alcohol toxicity.

SOURCES & SCOPE

NIAAA: alcohol treatment and cravings (niaaa.nih.gov); ASAM/AAAP Clinical Practice Guideline on Stimulant Use Disorder (2024); CDC: naloxone (cdc.gov).

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The Fresh Start Room

Quit smoking: support, skills, and a plan

Quitting cigarettes is a process you can learn. Repeated attempts are common. You deserve practical support without judgment.

1

Prepare your day

Choose a quit date and arrange support. Remove cigarettes, ashtrays, and lighters. Plan for coffee, meals, stress, alcohol, and being around others who smoke.

2

Change one routine

After a meal, brush your teeth or take a safe walk. During a break, call someone or stretch. Ask others not to offer cigarettes.

3

Work through the craving

Delay acting, sip water, breathe comfortably, and do another activity. Keep your hands busy. Use your treatment plan and contact support when needed.

4

Learn from a lapse

If you smoke again, identify the trigger and contact support. Adjust the plan and restart. A lapse does not erase your effort or learning.

TRY IT IN REAL LIFE

Coffee is a strong trigger. Before your quit date, plan a different seat, a glass of water, and someone you can text. When an urge arrives, use that routine and your clinician-recommended treatment.

The Fresh Start Room

Your practice page / Write, speak, or reflect privately

Find support that fits

Counseling and medication can help. Ask a doctor or pharmacist about nicotine replacement and prescription options; suitability depends on your health and medicines. Quitting can change how some medicines and caffeine affect you. Free coaching: 1-800-QUIT-NOW. Visit Smokefree.gov.

01 My reason and quit date

02 My hardest routine or trigger

03 My replacement action

04 My treatment plan / clinician questions

05 My support contact / how I will restart

One thing I learned / One adjustment I will try

The Fresh Start Room

Keep-close cards / Support, sources, and a next step

REMEMBER

My reason matters. One manageable step counts.

REPLACE

Change the routine: water, gum, movement, or busy hands.

SUPPORT

Use the plan. Contact support. 1-800-QUIT-NOW.

RESTART

Notice the trigger, adjust the plan, and try again.

CARE & SAFETY

Cigarette smoke harms lungs, the heart, and blood vessels. Recovery varies. Discuss persistent or severe withdrawal or mood symptoms with a clinician. Call 911 for severe chest pain, severe breathing trouble, or collapse; do not assume these are withdrawal. If using vapes to replace cigarettes, do not return to smoking; discuss a plan with your clinician.

SOURCES & SCOPE

CDC: How to Quit Smoking and Benefits of Quitting (cdc.gov/tobacco); National Cancer Institute: Smokefree.gov quit planning and cravings resources.

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The Breathing Room

Quit vaping: a plan for the next craving

Start with curiosity about your pattern. A useful plan includes your reason, replacement actions, and people who can support you.

1

Understand your pattern

Notice when you reach for the vape: waking, stress, boredom, after meals, or social settings. Record what you hoped vaping would do.

2

Choose your reason and plan

Write: I want ___ to be easier. Choose a quit date with support, plan safe disposal of supplies, and tell someone who can help.

3

Pause. Delay. Replace.

Put the device down. Delay briefly while sipping water, using sugar-free gum, occupying your hands, or taking a short safe walk.

4

Reach out and adjust

Tell a clinician what you use, how often, nicotine strength, other substances, and previous attempts. A lapse is information for adjusting your plan, not a reason to give up.

TRY IT IN REAL LIFE

Boredom leads to reaching for the vape. Keep a small alternative nearby, such as gum or a hand activity. Put the device away, use your replacement, and message a support person if the urge stays strong.

The Breathing Room

Your practice page / Write, speak, or reflect privately

Know what you are noticing

Vape aerosol is not harmless water vapor. Nicotine can maintain dependence; withdrawal can affect mood, sleep, and concentration. If anxiety is a trigger, feel your feet and breathe comfortably. Talk with a clinician about treatment options. Support: Smokefree.gov or 1-800-QUIT-NOW.

01 My reason and planned quit date

02 My most common trigger

03 What I hope vaping will do / another way to meet that need

04 My replacement action and support contact

05 My clinician questions / how I will adjust after a lapse

One thing I learned / One adjustment I will try

The Breathing Room

Keep-close cards / Support, sources, and a next step

NOTICE

What triggered this urge? What do I need?

REPLACE

Put it down. Delay briefly. Try your planned alternative.

CONNECT

Ask for support. Smokefree.gov / 1-800-QUIT-NOW.

CARE

Pain or breathing symptoms need assessment, not a breathing exercise.

CARE & SAFETY

Chest pain, persistent cough, or breathing symptoms need medical assessment. Call 911 for severe chest pain, severe breathing trouble, fainting, or collapse. Do not treat these as ordinary withdrawal or anxiety. Breathing exercises are not treatment for breathing difficulty. Keep nicotine liquids away from children and pets. Do not return to cigarettes to stop vaping.

SOURCES & SCOPE

CDC: Health Effects of Vaping and Vaping and Quitting (cdc.gov/tobacco/e-cigarettes); National Cancer Institute: Smokefree.gov vaping and nicotine withdrawal resources.

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House of Mind™

THE PAUSE ROOM

Make space for your next choice.

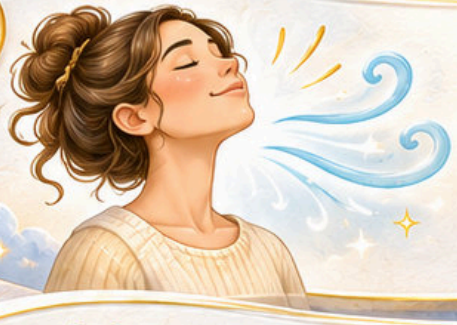
1



S — STOP

Pause before acting.
Put down the phone or stop speaking for a moment if safe.

2



T — TAKE A STEP BACK

Give yourself space. Take a few comfortable breaths without forcing or holding them.

3



O — OBSERVE

What am I feeling?
What are the facts?
What urge do I notice?

4



P — PROCEED MINDFULLY

Choose one next step that supports your values, your goal, and safety.

MY PAUSE PHRASE: _____

MY NEXT HELPFUL STEP: _____

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