

Name: _____

Date: _____

Addiction

B N U E G N I N N A L P T N E M T I M M O C Z A
H M X T K C R Q W I Q T R I G G E R S E D P G F
X U G O C S Y R E V O C E R P M G U E G W T R O
E C S S E N G N I L L I W I S N T J X S H N N L
W V W U D X T M D M L L S F B W H K P X T E O U
F R E J E D N C M C F S N Q Q P E M E W L M I M
L I F I Y H P L V Q E D I N R C R B R D A T T Q
A Q R K L F J Y H N G R D O F E A B I D E A A A
V K S S L E T O S P H U C A P L P W E G H E C Z
O O X L T E B S U J R R Z P K R Y Y N G L R I P
T G K X I S E J O R A A S N C S T L C D A T N H
C H D R J L T F H S N T Y L O I Z I E Q T B U Q
L M B X R F S E T K A A D E L I L B W D N E M V
L O R E E L U I P B K Y L I R I T C P P E N M E
S H W A A H N B I H I F B O F J F A J R M L O J
Y O F O D A E L R K O A A E C E N D C L H K C H
P M G N T X I E E Z T M S H P D T D N I A D X A
R B A I N T T E G N N T E Y K U K I W T D C Z P
G J O O Y H C B U R Y G L R G T X C L A X E A P
N N Y A G T T O C L H J J S D I V T M N L A M I
I H D U L F C B E I W B S G D T A I Q Z N K C N
P Q A K N C Y T R G I K Q L Y A E O A J A A S E
O L N U A Q I D K R O V I H B R P N D R K V P S
C G S O D O N S G N I T E E M G I R Y Z U J T S

- | | | | | |
|-----------------|-----------------|----------------|---------------|---------------|
| Procrastination | First Step Home | Accountability | Powerlessness | Communication |
| mental health | Willingness | Medication | Experience | Commitment |
| Gratitude | Lifestyle | Stability | Happiness | Treatment |
| addiction | Planning | Laughter | meetings | sobriety |
| triggers | recovery | Believe | Journal | Therapy |
| Prayer | coping | Walks | Goals | |