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A Qualitative Study On the Lived Experiences of Young Adults Abstaining from Modern Addictions

A Relational-Existential and Choice-Theoretic Phenomenological Synthesis of a Three-Month Abstinence Experiment

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Methodological status: This manuscript is a scholarly simulation based on de-identified educational artifacts. It was not conducted as institutional review board-approved human-subjects research and should not be represented, submitted, or cited as an empirical study without formal ethical review, consent verification, and methodological redesign.

Abstract

> Contemporary discussions of compulsive behavior often reduce change to willpower, discipline, or the management of a single substance or platform. This phenomenologically informed secondary synthesis examined the lived experience of voluntarily abstaining from a highly reinforcing and socially embedded behavior for approximately three months. The de-identified corpus included 16 final reflective papers, six longitudinal discussion rounds, and two mock-session transcripts from a graduate addictions course. Hermeneutic analysis was interpreted through relational-cultural theory, existential psychotherapy, and Choice Theory/Reality Therapy. Eight themes described the phenomenon: the behavior worked and became a problem; relief was mistaken for restoration; the habit sometimes carried the relationship; choice was embodied and situated; freedom often required limits and support; shame converted behavior into identity; meaning and desired identity oriented paradox; and recovery was a practice of return that reopened creative and relational capacity. Choice Theory deepened the synthesis by conceptualizing the behaviors as attempts to satisfy legitimate needs, locating rituals and desired identities within the Quality World, organizing experience through Total Behavior, and translating insight into self-evaluation and planning through the WDEP process. The central interpretation is that change becomes more sustainable when immediate benefit is acknowledged, cumulative effectiveness is honestly evaluated, responsibility is situated within embodied and relational conditions, and people orient choice toward what they want to create and who they want to become. The manuscript is a scholarly simulation rather than institutional review board-approved research and should be read as an interpretive educational synthesis.

Keywords: phenomenology, behavior change, abstinence, connection, identity, meaning, agency, paradox, relational-cultural theory, existential psychotherapy, Choice Theory, Reality Therapy, Quality World, Total Behavior, WDEP

Introduction

High-access rewards are woven into ordinary contemporary life. Short-form media fills transitions and silence; nicotine can punctuate work, driving, socializing, and stress; shopping offers novelty, control, and anticipation; food and coffee organize ritual, hospitality, and belonging. These behaviors are not equivalent in clinical severity, physiological dependence, or risk. Yet the narratives examined here suggest that they can become phenomenologically similar in one important respect: a behavior that begins as useful, pleasurable, social, or soothing may gradually become automatic, costly, and difficult to choose freely.

Public conversations about these patterns frequently move too quickly toward instruction. People are told to delete an application, set a limit, replace a craving, become disciplined, or decide that they want change badly enough. Such advice may be practical, but it often bypasses the lived conflict underneath the behavior. Participants in this experiment did not simply want a substance,

purchase, snack, or scroll. They wanted relief from agitation, a bridge through boredom, a familiar ritual, a shared social language, a sense of control, an escape from difficult effort, or reassurance that they still belonged. The same behavior could offer connection and create distance, feel like freedom and produce captivity, provide comfort and deepen dysregulation, or preserve a familiar identity while obstructing an emerging one.

The semester-long abstinence experiment created an unusual form of experiential interruption. For approximately three months, graduate counseling students selected a socially normalized substance or behavior and attempted to stop or substantially restrict it while reflecting on cravings, withdrawal-like experiences, relapse, relationships, coping, and self-understanding. Their final case papers and longitudinal reflections were educational assignments rather than research interviews. Even so, together they form a rich record of what happened when a familiar regulatory strategy was removed and the person had to encounter the space it had occupied.

The present manuscript asks: What is the lived experience of voluntarily abstaining from a highly reinforcing and socially embedded behavior for approximately three months, and how does that experience alter a person's relationship to connection, responsibility, identity, meaning, creativity, and agency? A second question emerged from the data: When participants encountered paradoxical situations in which both sides protected something real, what allowed them to orient toward a choice?

The purpose of the synthesis is not to classify ordinary habits as equivalent to severe substance use disorders, nor to infer prevalence from a small educational corpus. It is to describe the experiential structures that recurred across distinct behaviors without erasing important differences. The analysis therefore treats the participants' language as evidence of lived meaning rather than diagnostic proof. The resulting interpretation proposes that meaningful change depends less on winning a moral contest against pleasure than on recovering authorship: the ability to remain in contact with one's body, values, relationships, and future while an immediately rewarding alternative is available.

Theoretical Foundation

The synthesis was grounded in hermeneutic phenomenology and interpreted through relational-cultural theory, existential psychotherapy, and Choice Theory/Reality Therapy. These traditions were selected because the corpus repeatedly located behavior at the intersection of lived embodiment, connection, identity, need satisfaction, responsibility, and meaning. Phenomenology preserved the texture and contradiction of experience; relational-cultural theory illuminated connection, disconnection, and relational context; existential theory clarified freedom, responsibility, identity, and purpose; and Choice Theory provided an applied framework for examining what participants wanted, how current behavior attempted to meet those wants, whether it was working across time, and what more effective plans might restore agency.

Phenomenological Orientation

Phenomenology seeks the meaning structure of experience as it is lived, remembered, and expressed rather than reducing experience to an external variable or causal mechanism (Moustakas, 1994; van Manen, 2016). The question is not only what participants did, but how the

world appeared when the behavior was available, removed, resisted, or resumed. Four phenomenological dimensions were especially relevant. Lived body appeared in restlessness, tingling, irritability, fatigue, tunnel vision, withdrawal, and relief. Lived time appeared in the conflict between an immediate reward and a future self, in the emptiness of unstructured minutes, and in repeated promises to begin again tomorrow. Lived space appeared in the couch, car, workplace, restaurant, phone screen, social gathering, and home environment that either invited or interrupted automatic behavior. Lived relation appeared in the fear of being boring, rude, excluded, burdensome, or unknown.

A hermeneutic orientation also acknowledges that experience does not arrive without interpretation. Participants understood their behavior through concepts learned in class, personal histories, cultural narratives, and expectations about addiction. The analyst likewise brought relational, existential, and behavior-change commitments to the material. Rather than claiming a neutral view from nowhere, the analysis used reflexive bracketing: interpretations were repeatedly compared with direct experiential language, contradictory cases, and the limits of the source material.

Relational-Cultural Foundation

Relational-cultural theory begins from the premise that human beings develop through and toward connection rather than through a simple movement from dependence to independence (Jordan, 2017). From this perspective, disconnection is not merely the absence of company. It can include the experience of not mattering, being unseen, anticipating rejection, or believing that one's authentic needs will burden a relationship. People may develop strategies of disconnection to protect themselves from relational vulnerability, even when those strategies eventually intensify isolation.

This framework illuminated why apparently individual habits were so often socially organized. Shopping could be the family's language of care. Food could signify hospitality, tradition, celebration, and respect. Coffee could carry warmth, welcome, and a protected morning ritual. Nicotine and alcohol could become a shared social rhythm. Social media could maintain weak ties, collective identity, humor, and the reassurance of being included. Abstinence therefore threatened more than access to a reward. It sometimes threatened a person's place in a relationship.

Relational-cultural theory also complicates the cultural ideal of solitary willpower. Participants were more able to sustain change when other people remembered their goals, altered communication, shared alternative rituals, removed access, or simply received disclosures without judgment. Agency appeared not as independence from others but as a capacity strengthened through mutuality, accountability, and relational safety.

Existential Foundation

Existential thought situates human beings within unavoidable tensions involving freedom, responsibility, isolation, meaning, and the creation of self through choice (Frankl, 2006; Yalom, 1980). Freedom in this context is not unlimited control. It is the situated capacity to respond within conditions that include embodiment, history, social pressure, design, grief, habit, and uncertainty. Responsibility is therefore distinct from blame. It concerns the person's response to the freedom that remains.

The participants' dilemmas were often existential before they were behavioral. They asked, implicitly or directly: What kind of life am I building? What deserves my attention? Am I willing to feel discomfort in service of something I value? Who am I without the role this behavior helps me play? Can I remain connected and still choose differently? These questions became especially visible when old habits collided with developmental transitions, relational commitments, health concerns, professional aspirations, or the desire to become trustworthy to oneself.

Meaning functioned less as a positive feeling than as an organizing direction. Frankl (2006) argued that meaning allows suffering to be held within a larger orientation, while Yalom (1980) described meaninglessness as an existential concern that can leave activity unanchored. In the present corpus, discomfort became more tolerable when it was connected to a relationship, body of work, health commitment, professional identity, or desired way of being. Creativity also carried existential significance. May (1975) described creation as an encounter in which a person participates in bringing something into existence. When participants shifted from passive consumption toward music, writing, art, cooking, movement, conversation, or the care of their environment, the change was not merely productive. It was a renewed participation in life.

Choice Theory and Reality Therapy as an Applied Framework of Agency

Choice Theory conceptualizes behavior as purposeful and internally organized around attempts to satisfy five broad needs: survival, love and belonging, power, freedom, and fun (Glasser, 1998). Within the present synthesis, these needs were not treated as hidden causes that could be assigned with certainty. They functioned as interpretive hypotheses for asking what a behavior was trying to accomplish. Scrolling, shopping, eating, drinking, vaping, or using coffee could simultaneously support belonging, enjoyment, freedom from pressure, competence, bodily comfort, or a sense of control. The legitimacy of the need did not establish the long-term effectiveness of the strategy used to meet it.

The concept of the Quality World was particularly relevant to identity and paradox. Choice Theory uses this term for the internal pictures of people, experiences, values, possessions, roles, and ways of living that a person associates with a satisfying life (Glasser, 1998; Wubbolding, 2011). In the corpus, the selected behavior often belonged to such a picture: coffee was linked with warmth and solitude; social media with relevance, humor, and participation; food with hospitality and belonging; shopping with style, autonomy, and anticipation; and substances with social freedom or a familiar version of self. Abstinence could therefore threaten more than reward. It could unsettle a picture of connection, identity, adulthood, celebration, or freedom.

Choice Theory also describes Total Behavior as the interdependent organization of acting, thinking, feeling, and physiology (Glasser, 1998). This construct complemented the phenomenological finding that choice was never merely cognitive. Participants acted by reaching, opening, buying, eating, drinking, or avoiding; thought through bargaining, minimization, permission, and future-reset narratives; felt anxious, deprived, excited, ashamed, or relieved; and experienced restlessness, fatigue, withdrawal, agitation, hunger, or brain fog. The model directs attention toward components that may be more immediately influenceable without implying that feelings, physiology, dependence, or environmental pressure are freely chosen.

Reality Therapy translates Choice Theory into a process of clarification and self-evaluation commonly organized through WDEP: Wants, Doing and Direction, Evaluation, and Planning

(Wubbolding, 2011). This process fits the emerging meaning-and-identity compass. It asks what the person wants and needs, what they are doing and where it is taking them, whether the strategy is helping across immediate and cumulative time horizons, and what specific plan they are willing to practice. In this manuscript, Choice Theory is therefore used as a framework of situated agency. It strengthens responsibility without treating choice as context-free or converting physiological dependence, social pressure, commercial design, and relational vulnerability into moral failure.

Integrated Relational-Existential and Choice-Theoretic Lens

Taken together, these foundations suggest that the opposite of compulsion is not isolation, purity, or endless self-control. It is authorship in connection: the capacity to recognize a legitimate need, evaluate whether the current strategy is moving toward what is wanted, and choose within relationships and conditions that make agency more or less executable. Relational-cultural theory protects the analysis from treating autonomy as separation. Existential theory protects it from reducing behavior to need satisfaction alone by asking what life, responsibility, identity, and meaning the person is creating. Choice Theory supplies a practical bridge from those questions to present behavior, self-evaluation, and planning. The integrated position is compassionate but not exculpatory: patterns make sense, contexts matter, and the person remains responsible for participating in what happens next.

Method

Design and Methodological Status

This manuscript is a phenomenologically informed secondary synthesis of de-identified educational narratives. It is written in the form of a qualitative article to preserve the depth and organization of the analysis, but it is not an institutional review board-approved study. The educational materials were not originally produced under a research protocol, and the present synthesis cannot establish consent for research participation, confidentiality procedures beyond the de-identification supplied, or the protections ordinarily required for publication.

The analytic posture was hermeneutic rather than strictly descriptive. The goal was to identify recurring structures of meaning while preserving contradictions, negative cases, and differences among behaviors. Abstinence was treated as an experiential intervention that made previously automatic functions more visible.

Data Corpus

The primary corpus consisted of 16 final reflective case papers written after a semester-long abstinence exercise. The selected targets included social media or short-form content (n = 5), nicotine or vaping (n = 4), clothing or online shopping (n = 3), refined sugar, unhealthy snacking, or bread (n = 3), and coffee (n = 1). Six rounds of biweekly discussion posts provided longitudinal descriptions from the beginning of abstinence through later reflections on social impact, relapse, and primary lessons. Supplementary mock-session transcripts added depth around alcohol, cannabis, reward, effort, relational conflict, nostalgia, and identity transition.

Two previously developed synthesis documents - an Audience Experience Atlas and a Core Paradox Map - were reviewed as analytic memos. They were not treated as independent evidence

because they had already been derived from portions of the same corpus. Their function was to preserve earlier coding decisions, language fragments, contradictory evidence, and interpretive questions while the expanded corpus was reexamined.

Names, pseudonyms, institutions, dates, locations, demographic details, diagnoses, family histories, and unusual combinations of circumstances were excluded from the manuscript. Short quotation fragments are presented without participant identifiers to reduce the risk of re-identification. This privacy decision limits the traceability typically expected in published qualitative work but was prioritized for the present internal synthesis.

Table 1 Composition of the Final Reflection Corpus

ABSTINENCE TARGET	NUMBER OF FINAL REFLECTIONS	PHENOMENOLOGICAL FEATURES EMPHASIZED
Social media or short-form content	5	Automatic checking, boredom, anxiety, cultural participation, weak-tie connection, attention, replacement behaviors
Nicotine or vaping	4	Withdrawal, oral and sensory ritual, alcohol-linked cues, access, social bonding, irritability, harm reduction
Shopping or clothing purchases	3	Novelty, control, urgency, family or workplace bonding, financial consequence, browsing and anticipation
Refined sugar, snacking, or bread	3	Comfort, satiety, culture, hospitality, celebration, restriction, preparation, social burden
Coffee	1	Ritual, warmth, family meaning, stimulation, replacement, protected solitude

Research Question

The primary question was: What is the lived experience of voluntarily abstaining from a highly reinforcing and socially embedded behavior for approximately three months? The interpretive subquestions examined how participants experienced connection and disconnection, paradox, responsibility, identity, meaning, purpose, avoidance, distraction, creativity, and agency. A further Choice Theory-informed subquestion asked: What legitimate need or Quality World picture did the behavior appear to serve, and how did participants evaluate whether their current strategy moved them toward or away from what they most wanted?

Analytic Process

Analysis proceeded in six recursive phases. First, the complete corpus was read for immersion, with attention to temporal sequence: anticipation, early abstinence, later difficulty, lapse or recommitment, and concluding meaning. Second, experiential meaning units were identified, including bodily sensations, emotions, recurring thoughts, metaphors, triggers, relational episodes, and descriptions of consequence. Third, meaning units were horizontally considered before being clustered into provisional themes so that a dramatic single narrative would not be mistaken for a group pattern.

Fourth, the provisional themes were examined across the phenomenological dimensions of body, time, space, relation, and self. Fifth, imaginative variation was used to ask what structural conditions appeared necessary for the experience to take the form it did. For example, the analysis

distinguished craving for an item from the relational ritual, internal state, or anticipated identity that the item carried. Sixth, themes were interpreted through relational-cultural and existential concepts, and then tested against contradictory evidence. Cases in which abstinence was relatively easy, in which reintroduction was experienced as appropriate, or in which greater restriction could become unsafe were retained rather than forced into a single abstinence narrative.

Choice Theory was introduced as a second-order sensitizing framework rather than a deductive coding template. The analyst reviewed each provisional theme for possible references to the five basic needs, Quality World pictures, the four components of Total Behavior, internal versus external control, and the WDEP sequence. These concepts were used to generate questions and deepen interpretation, not to recode every behavior into a single need category. Unless a participant explicitly named a need or want, the resulting formulation remained an interpretation rather than direct evidence.

A two-horizon evaluation was also added to the analytic process. Immediate effectiveness referred to what the behavior accomplished in the moment, such as relief, stimulation, connection, or sensory comfort. Cumulative effectiveness referred to what repeated use left behind in attention, energy, relationships, finances, health, creativity, self-trust, and movement toward a desired life. This distinction allowed the analysis to acknowledge that a behavior could be effective in one time frame and ineffective in another.

The analysis did not treat participants' scientific explanations in their papers as validated evidence. Claims about dopamine, nervous system states, withdrawal, or addiction models were used only when they described the participant's meaning-making. The findings rest on lived descriptions, not on the accuracy of literature reviews embedded in the assignments.

Reflexivity and Positionality

The analyst occupied a dual position as instructor and interpreter and had preexisting commitments to relational work, nervous system education, meaningful behavior change, and the critique of engineered overstimulation. This position created access to longitudinal material and contextual depth, but it also increased the risk of confirming an existing philosophy. Reflexive safeguards included distinguishing participant evidence from interpretation, retaining negative cases, excluding the analyst's personal written experiences, treating prior synthesis documents as memos rather than new data, and avoiding claims of prevalence or diagnosis.

The course context also shaped participant writing. Contributors were counselors-in-training who had learned language about addiction, coping, nervous system states, and relapse. Their psychological literacy enabled unusually reflective accounts but likely influenced what they noticed and how they narrated it.

Choice Theory introduced an additional reflexive risk. Language of choice and responsibility can become blaming when it ignores dependence, physiology, oppression, commercial engineering, economic constraint, or relational consequence. The analyst therefore used the term situated choice and avoided inferring that participants selected their first urge, emotional state, withdrawal response, or available environment. Responsibility was located in the gradual capacity to evaluate, plan, seek support, redesign conditions, and return rather than in the assumption of unrestricted control.

Findings

Eight themes describe the shared structure of the experiment. The themes are not stages, and no participant expressed every element. They overlap because the behavior often performed several functions at once. Quotation fragments are brief, de-identified, and unattributed.

Across the corpus, the essence of the experience was an encounter with hidden function. When the behavior was removed, participants did not meet a neutral absence. They met the anxiety, fatigue, boredom, relational risk, ritual need, or identity conflict that the behavior had been helping them organize.

Choice Theory language is used in the findings as an interpretive layer rather than as participant terminology. References to needs, Quality World pictures, Total Behavior, and WDEP identify plausible structures in the data; they do not establish that every participant understood the experience through those concepts or that any single behavior served only one need.

THEME 1

The Behavior Worked - and That Was the Beginning of the Problem

Participants repeatedly returned to their selected behavior because it did something real. It changed a state quickly. Shopping offered "the thrill of the hunt" and a temporary sense of control. Scrolling filled empty minutes, interrupted anxious thought, and allowed the mind to disengage without preparation. Nicotine produced a buzz, sensory ritual, or perceived shift in focus and agitation. Food offered comfort, reward, fullness, familiarity, and social warmth. Coffee held stimulation, solitude, and a reliable transition into the day. The behavior's usefulness was not evidence against its problematic role; it explained its persistence.

The most common pre-behavior states were restlessness, boredom, overwhelm, fatigue, anxiety, and the aversion to beginning effortful tasks. Participants described an "itch," a "pull," "tunnel vision," and a sense that "I NEED it." One knew that scrolling was "not fun anymore," yet reported that the finger continued moving. Another described deciding to "turn off my brain" rather than think through a plan. These statements depict an urge not simply for pleasure but for a rapid exit from the present state.

From a phenomenological perspective, the behavior functioned as a state-change technology. It narrowed the field of awareness. The difficult paper, lonely evening, uncertain future, irritated body, or socially awkward moment receded while the behavior became immediate and concrete. This helps explain why insight was often inaccessible at the moment of choice. The reflective self that understood long-term cost was not absent, but it was temporarily less vivid than the available action.

The paradox became visible after the behavior. Relief was often followed by depletion, fog, regret, lost time, financial stress, renewed avoidance, or another craving. A brief return to social media "felt empty." Purchases were returned because the object was not the actual need. Nicotine relief was later understood by some as the ending of discomfort that dependence itself helped maintain. The original task remained, the boredom returned, and the relationship still required attention.

This theme also contained negative cases. Some rituals were not especially compulsive once a fitting substitute preserved their sensory and relational meaning. One participant's transition from

coffee to another warm drink was comparatively smooth because the morning pause, preparation, and comfort remained intact. This contrast supports a functional interpretation: removing the object without understanding the experience it carries creates a different task from replacing the object while preserving what matters.

The central experiential question was therefore not, "Why would I do something that does not help?" It was, "Why does the fastest thing that helps now leave me less able to inhabit what comes next?"

Through a Choice Theory lens, the behavior can be understood as a purposeful attempt to obtain something the person wanted, even when the strategy had become narrow or costly. The audience was not choosing between having a need and not having one. They were choosing, often under highly conditioned circumstances, how to try to meet needs for belonging, freedom, competence, enjoyment, or bodily well-being. The analytic question therefore shifted from whether the need was legitimate to whether the current strategy was effective enough, durable enough, and relationally congruent enough to keep using.

THEME 2

Relief Felt Like Rest, but Relief Was Not Always Restoration

Participants frequently reached for the behavior during moments they described as needing to unwind, take a break, reward themselves, or stop thinking. Yet many of the same behaviors left them less rested. They were physically still but cognitively saturated, distracted but not restored, or temporarily soothed and subsequently more irritable. This distinction between relief and restoration became one of the most consequential insights in the corpus.

Relief changed the immediate moment. Restoration was recognized by what the person could access afterward: steadier energy, clearer attention, willingness to return to responsibility, emotional availability, and a greater capacity to choose. Scrolling could reduce awareness of anxiety while intensifying fatigue and lost-time shame. Alcohol could create a night of nostalgia and social energy while reducing effort and participation for several days. Shopping could interrupt stress while adding debt, clutter, and more decisions. A highly rewarding food could satisfy quickly while leaving the person physically uncomfortable or concerned about losing control.

The temporal structure of the experience mattered. Immediate reward was vivid; delayed consequence was abstract until it arrived. Participants often used future-reset thoughts to bridge this gap: tomorrow, after the trip, when the semester settled, or after one final exception. The future self became responsible for repairing what the present self did not want to tolerate. In this sense, avoidance displaced rather than eliminated the demand.

Restoration usually required more participation than relief. Going outside, preparing a meal, completing a small task, moving the body, calling someone, reading, or creating something demanded initiation. These activities were precisely what felt least appealing when participants were emotionally low or dysregulated. The healthier option was not always unknown; it was more effortful at the moment when effort felt scarce.

This produced a second paradox: the people most in need of restorative action often felt least able to choose it. They could be exhausted and still unable to stop seeking stimulation, or restless and simultaneously unmotivated. The experience challenges the simplistic opposition between laziness

and discipline. The person may be attempting to recover through a method that suspends awareness but does not replenish capacity.

Participants began to evaluate rest differently when they asked what an action left behind. The meaningful unit was no longer only the pleasure or calm during the behavior, but the entire arc before, during, and after. Relief was not condemned. It was placed in a larger temporal and existential context: Does this help me disappear from the moment, or does it help me return to the life that is asking for me?

This distinction corresponds to the evaluative center of Reality Therapy. The question "Is it working?" became more precise when it was asked twice. Immediately, the behavior often worked: it reduced awareness, changed arousal, created pleasure, or restored social ease. Cumulatively, it could move the person away from sleep, intimacy, responsibility, creativity, health, or self-trust. Self-evaluation became more honest when neither time horizon was denied.

THEME 3

Sometimes the Habit Was Carrying the Relationship

Connection was not merely an external influence on abstinence; it was often embedded in the behavior itself. Social media provided shared references, cultural fluency, humor, weak-tie awareness, and reassurance that one remained included. Shopping functioned as family recreation, celebration, and consolation. Food communicated welcome, respect, affection, tradition, and religious or cultural belonging. Coffee carried memories of warmth and hospitality. Nicotine, alcohol, and vaping marked friendship, grief, late-night conversation, celebration, and the rituals of going out.

Consequently, refusing the behavior could feel like refusing a person. Participants feared becoming a "party pooper," the difficult guest, the person who imposed restrictions, or the one who no longer understood the joke. Some hid their goal because disclosure would close the loophole. Others accepted food they did not crave because saying no felt disrespectful. A boundary that appeared individually rational could be experienced relationally as a threat to belonging.

Relational-cultural theory clarifies why this conflict was so potent. If connection is a developmental necessity, a behavior that carries connection cannot be removed as though it were an isolated object. Participants were not only losing stimulation. They were risking exclusion, misunderstanding, or a reorganization of closeness. In a mock-session narrative, alcohol was connected to the fear that friends would no longer experience the person as fun. The drinking ritual also served as a "time capsule" into an earlier, less burdened version of friendship and selfhood. The feared loss was developmental and relational, not simply chemical.

At the same time, the behavior could weaken the connection it promised. Social media created constant awareness but sometimes replaced the vulnerability of directly asking a friend to spend time together. Shopping absorbed mental energy that could have gone toward presence with a partner. Withdrawal-related irritability strained relationships. High-intensity weekends left household responsibilities to someone else. Participants described being physically near loved ones while attention remained elsewhere.

Abstinence therefore produced both disconnection and deeper connection. Some missed acquaintances, cultural events, or shared humor. Others experienced more direct texts, longer conversations, stronger partner engagement, and greater clarity about which relationships existed

beyond a platform or ritual. One reflection contrasted "surface-level" contact with more intentional relationships. Another discovered that friends' efforts to communicate outside an application revealed care that passive viewing had obscured.

Support was most protective when it did not become surveillance or control. Helpful others asked, adapted, shared alternatives, removed access, remembered the commitment, and made room for honest disclosure. Unhelpful others minimized the goal, continued offering the substance, financed the behavior, or treated abstinence as judgment of their own choices. The relational task was not to identify people as simply supportive or unsupportive, but to determine whether the relationship could tolerate differentiation.

The theme suggests that lasting change may require a new ritual, not only a new rule. People need ways to celebrate, soothe, welcome, joke, grieve, and feel chosen that do not depend entirely on the old behavior. Sometimes the habit was carrying the relationship; the deeper question was whether the relationship could learn to carry more of itself.

Choice Theory clarifies this relational burden through the Quality World. The behavior was often embedded in an internal picture of what closeness, celebration, hospitality, youth, or social competence looked like. Asking someone to remove the behavior without helping them revise or expand that picture risked making recovery synonymous with exclusion. Change required new ways of placing belonging, fun, freedom, and valued people in the Quality World without making the old behavior the only route to them.

THEME 4

The Body, the Place, and the Moment Were Often Deciding Before the Story Arrived

Participants described choice as an embodied and situated event rather than a purely cognitive decision. Cravings appeared as agitation, tingling, oral fixation, restlessness, irritability, fatigue, headaches, a sense of urgency, or the inability to think about anything else. The body reached toward a familiar sequence before the person had formed a complete justification. Muscle memory opened an absent application. The hand searched for an object. Access produced use before reflection could fully organize a response.

Places also carried behavioral memory. The couch, bed, car, workplace, retail floor, restaurant, bar, family home, and coffee shop each made certain actions feel natural. Working from home intensified shopping and scrolling. A new job or a different location reduced urges without requiring constant resistance. Removing an application, hiding it, discarding nicotine, or using a computer rather than a phone changed the field of possibility. Participants sometimes interpreted these changes as evidence of stronger willpower, but the corpus more consistently suggested that the environment was sharing the work.

Time had its own texture. Transitions, waiting, evenings, meals, weekends, and unexpected free periods were recurring high-risk moments. Both excessive busyness and unstructured time could protect or destabilize. A packed schedule left little opportunity for the behavior, but it could also create depletion that intensified later craving. An unexpected day off did not necessarily feel restful; without momentum or a prepared alternative, free time exposed anxiety that had been held at bay.

Positive events were as important as distress. Birthdays, weddings, holidays, trips, popular cultural events, family visits, and rewards after successful effort generated permission to suspend the plan. The internal logic was not always, "I feel bad, so I need relief." It was also, "This is special, so the

ordinary boundary should not apply." Celebration could function as a socially sanctioned form of forgetting the future self.

These experiences complicate the moral language of choice. Participants were responsible for their actions, but they did not choose from a neutral environment. Choice was shaped by withdrawal, fatigue, embodied memory, social availability, algorithmic convenience, cultural ritual, and the physical presence of the behavior. Existential responsibility becomes more accurate when it is situated: What response remains possible here, under these conditions, and what conditions can be redesigned before the next moment arrives?

Environmental design was most effective when understood as agency rather than avoidance. Removing cues, preparing alternatives, changing work locations, and communicating boundaries were not admissions of weakness. They were ways of refusing to make every decision at the point of maximum vulnerability.

The concept of Total Behavior organizes this finding without separating mind from body. In a high-risk moment, acting, thinking, feeling, and physiology moved together: a hand reached, a permission thought appeared, urgency intensified, and the familiar sequence accelerated. Intervention did not require immediate control over every component. A person might not be able to eliminate loneliness, withdrawal, or craving, but could alter an action, redirect attention, leave a setting, contact someone, eat, rest, or remove access. Acting on one available component could change the direction of the total sequence.

THEME 5

Freedom Often Required Limits, Structure, and Other People

Many participants initially equated freedom with unrestricted access and self-control with the ability to remain moderate in the presence of temptation. Abstinence felt extreme, depriving, or unnecessary. Yet unlimited availability often produced the least deliberate behavior. The application opened automatically, the purchase occurred before reflection, or one social use resumed daily use. Participants encountered a paradox: a limit could feel restrictive while restoring the capacity to choose.

Clear boundaries reduced internal negotiation. Ambiguous rules invited loopholes: it did not count if someone else paid, if the item was on sale, if the use was social, if the content was educational, if the dose was weaker, or if the event was special. Rationalization was not merely deception. It was the mind attempting to preserve immediate relief, autonomy, and belonging while also retaining a preferred self-image. Nevertheless, constant negotiation exhausted agency.

Structure was particularly useful when it was self-authored. Time-limited commitments, prepared substitutes, delayed decisions, application blockers, designated devices, planned meals, and explicit social strategies externalized part of the decision. Participants did not have to reconstruct the value hierarchy each time a cue appeared. The rule protected an earlier, more reflective choice.

Relational accountability served a similar function. A group kept the commitment emotionally present, normalized struggle, and made lapses discussable. Partners and friends sometimes became a bridge to the person's own intention when internal motivation weakened. This supports an agentic rather than dependent interpretation of support. Bandura (2001) described personal agency as operating within social systems and alongside proxy and collective forms of agency. In

the corpus, the person remained the author, but authorship was strengthened through coordinated support.

The tension between autonomy and support was especially visible after lapses. Participants wanted the freedom to define moderation or harm reduction for themselves, yet they also recognized that reduced accountability made boundaries easier to loosen. Some feared external expectations because they generated guilt or rebellion. Support was sustainable when it helped the person remember a chosen direction rather than replacing choice with compliance.

Insight alone did not reliably cross the gap into action. Participants could explain the pattern in detail and still act automatically under fatigue, craving, access, or social pressure. The experiment showed why psychologically literate people may remain stuck. The missing element is not always another explanation. It may be a structure capable of holding the insight when the activated self cannot easily retrieve it.

The lived meaning of discipline shifted accordingly. Discipline was initially imagined as force, deprivation, or a trait possessed by other people. Over time, some participants experienced it as protection, preparation, and the practice of making future values easier to enact. One described self-restraint as "a form of self-preservation." The opposite of compulsion was not the absence of desire. It was a more durable relationship to choice.

This is also an internal-control paradox. Participants wanted the decision to remain their own, yet their self-authored choices were more durable when external conditions were arranged to support them. Choice Theory distinguishes responsibility for one's own behavior from attempts to control another person (Glasser, 1998). In this corpus, a boundary, group, blocker, or supportive partner was most useful when it protected an internally chosen direction rather than demanding compliance. Structure did not have to compete with autonomy; it could preserve autonomy from the automatic choice already favored by the environment.

THEME 6

Shame Turned a Behavior Into an Identity Verdict

Lapses generated more than disappointment about a specific action. They threatened valued identities: disciplined, intelligent, honest, mature, reliable, self-aware, and capable. Participants asked, "What is wrong with me?" and described feeling lazy, hypocritical, weak-willed, childish, or unable to trust themselves. The feared meaning was often larger than the event: perhaps the behavior revealed who they really were.

Shame also appeared before a lapse. Some participants were ashamed that the behavior mattered so much, that abstinence was harder than expected, or that they had judged other people with addictions. Others feared telling their group or support system because disclosure would reveal inconsistency. The impulse to hide protected the social self in the short term but reduced access to the very relationships that helped them return.

Relational-cultural theory frames chronic shame as a force of disconnection. The person anticipates that the full truth will make them less worthy of relationship and therefore conceals the experience. In the corpus, secrecy often loosened accountability and made continued use more likely. One participant summarized the counterforce in a memorable phrase: "Grace and connection are the army" against shame and isolation.

Compassion, however, generated its own paradox. Participants worried that being gentle with themselves might become permission, minimization, or another loophole. They moved between "I need to stop shaming myself" and "maybe I need to be harder on myself." The most useful stance was neither punitive nor permissive. It was compassionate accountability: the pattern made sense, the consequences remained real, and the next response still belonged to the person.

Participants who interpreted relapse as a total failure were more likely to resume the old pattern or delay recommitment. Those who treated it as information were more able to identify the trigger, change the environment, revise a boundary, and return. This is consistent with behavior-change scholarship that frames relapse as a potentially informative part of recursive change rather than proof that change is impossible (DiClemente & Crisafulli, 2022).

The timing of shame mattered. An intentional exception sometimes produced less guilt during the act but made reorientation harder afterward. An accidental lapse could create immediate guilt while allowing a quicker return because the person's commitment remained intact. This suggests that the meaning assigned to the lapse, not merely the amount consumed or time spent, shaped the trajectory that followed.

The deeper transformation occurred when participants separated identity from pattern without separating responsibility from action. "I did this" did not have to become "this is who I am." That distinction preserved enough dignity to remain in contact with the truth.

Reality Therapy's emphasis on self-evaluation offers an alternative to the identity verdict. After a lapse, the central questions become: What did I want in that moment? What did I do? What did the choice provide? Did it move me toward or away from what I want? What needs to change in the plan? This sequence preserves responsibility while refusing to make humiliation the mechanism of change. The behavior can be evaluated as ineffective without defining the person as defective.

THEME 7

Meaning and Desired Identity Became the Compass When Values Collided

Participants did not encounter simple conflicts between health and harm. They encountered competing values: belonging and integrity, rest and responsibility, pleasure and future capacity, spontaneity and consistency, autonomy and accountability, celebration and self-trust. Because both sides contained something real, rules alone could not resolve every situation.

Across the corpus, motivation strengthened when the change was connected to something being created. The desired future included a more present partnership, a healthier body, financial stability, professional integrity, clearer attention, a peaceful home, deeper friendship, and work that mattered. Few participants consistently used the words meaning or purpose, but their descriptions of what they wanted to protect functioned as purpose structures. They were not only trying to consume less. They were attempting to participate differently in their lives.

Identity gave the future direction emotional form. Participants wanted to become intentional, reliable, present, creative, healthy, self-respecting, and capable of discomfort. They feared becoming boring, out of touch, burdensome, restrictive, addicted, lazy, or someone who repeatedly abandoned commitments. A mock-session narrative made this threshold explicit: the old social identity was organized around being fun and carefree, while the emerging identity involved partnership, responsibility, and the willingness to contribute effort. The recognition was painful:

"This is not who I want to be," yet the pattern had also been part of who the person had known themselves to be.

Existentially, behavior change became an act of self-creation. Identity was not reduced to affirmation or a fixed essence. It was practiced through repeated responses. Completing a small task, telling a friend the truth, tolerating an urge, returning after a lapse, or choosing a planned amount became evidence about the kind of person one was becoming. The action mattered partly because of what it made possible and partly because of what it taught the person about themselves.

This interpretation generated two orienting questions: What do I want to create with my life, attention, energy, and relationships? Who do I want to be in the way I respond to this moment? These questions did not invalidate the immediate need. They placed it beside a larger direction. The person could acknowledge, "Part of me wants relief, and part of me wants to keep my commitment," then decide which value needed to lead now.

Meaning did not require grand purpose. It could be concrete and relational: being awake for a conversation, preparing tomorrow's meal, protecting sleep, finishing a page, keeping a promise, or showing up without hiding. The smallest congruent action was often more useful than an idealized transformation. A compass was necessary precisely because perfection was not.

The findings suggest that "What is your why?" may be too thin when it remains instrumental. Better sleep, weight, focus, and savings matter, but they became more durable when attached to the life those benefits were meant to serve. Less stimulation, less spending, or less use inevitably raised the existential question: Less of this - for what?

Choice Theory adds specificity to this compass by asking what belongs in the person's Quality World and which needs a meaningful future is expected to satisfy. Existential theory then keeps the inquiry from becoming merely instrumental. The question is not only what the person wants to obtain, but what they want to create, contribute, love, and become responsible for. Meaning gives depth to wants; self-evaluation tests whether present behavior is actually serving them.

THEME 8

Recovery Was a Practice of Return That Reopened Creative and Relational Capacity

The experiment did not produce a single endpoint. Some participants planned continued abstinence. Others chose moderation, harm reduction, or deliberate reintroduction. A few discovered that social or occasional use rapidly restored compulsive patterns, while others concluded that complete removal was unnecessary or socially unsustainable. The common transformation was not purity. It was increased knowledge of the conditions under which choice was lost or recovered.

Recovery was experienced as nonlinear. Early confidence could be followed by a difficult later week. A long period of abstinence did not erase automatic memory. A brief lapse could remain brief or become a return to continuous use. The crucial practice was return: reorienting to the plan, reconnecting with support, and refusing to convert inconsistency into abandonment.

Participants learned that substitutions mattered, but not all replacements were restorative. Social media shifted into games, news, email, naps, food, shopping, or other screen use. Shopping shifted toward takeout or nicotine. Removing one behavior revealed a broader process of state regulation

and avoidance. This was discouraging when interpreted as evidence that everything was wrong, but illuminating when treated as a map of unmet needs.

For a notable subgroup, freed attention moved toward creation. Participants returned to music, visual art, writing, reading, cooking, gardening, movement, direct conversation, and care of their physical spaces. These activities did not always deliver the immediate intensity of the old behavior. Their reward developed through participation, completion, and the experience of bringing something into existence. Creativity was a movement from being acted upon by a stream of stimuli toward acting in the world.

The corpus also resisted a romantic opposition between digital consumption and creativity. Social platforms sometimes provided inspiration, community, professional visibility, humor, and access to creative knowledge. One reflective episode distinguished an impulsive post from the meaningful sharing of completed creative work. The issue was not whether a platform was inherently creative or corrosive. It was whether use served a chosen creation or displaced it.

Relational capacity reopened alongside creative capacity. Participants described more deliberate contact, greater partner presence, and a clearer appreciation of people who supported change. Recovery therefore appeared less as the successful removal of an object and more as the reoccupation of attention, time, relationship, and possibility.

The essential shift was from "How do I make this feeling stop?" toward "How do I return to the life I am trying to inhabit?" This return could be immediate after a lapse, gradual after withdrawal, or repeatedly practiced across the entire experiment. Self-trust did not emerge from never failing. It emerged from learning that one could come back.

In WDEP terms, return involved revisiting the plan rather than defending it as proof of character. Participants clarified what they wanted, described what they were doing, evaluated the direction and consequences of the strategy, and altered the next action or surrounding conditions. A useful plan was not a declaration of permanent purity. It was specific enough to enact under stress, sufficiently within the person's control, connected to the need beneath the behavior, and open to revision when lived experience revealed what had been missed.

Essence of the Phenomenon

> Phenomenological essence: Voluntary abstinence was experienced as the removal of a familiar bridge between the person and an unwanted internal state or unmet need. The absence exposed what the behavior had been regulating, carrying, postponing, symbolizing, and attempting to obtain. Participants confronted embodied discomfort, relational risk, temporal conflict, and uncertainty about who they were without the old pattern. Through a Choice Theory lens, the behavior frequently remained in the person's Quality World because it was associated with belonging, freedom, competence, fun, comfort, or a valued identity. Change became more sustainable when the behavior's immediate benefit could be acknowledged, its cumulative effectiveness could be self-evaluated, responsibility was separated from shame, environments and relationships shared the work of agency, and the person could plan a more congruent route toward what they wanted to create and who they wanted to become.

Discussion

The present synthesis suggests that paradox was not a complication surrounding the abstinence experience; it was its central structure. Participants were repeatedly caught between two valid but differently scaled truths. The behavior offered real relief and produced real cost. It created social connection and relational absence. Unrestricted choice felt free and became automatic. A boundary felt restrictive and restored authorship. Compassion protected the capacity to return and could be feared as permission. External structure supported autonomy and could feel controlling. Abstinence clarified the pattern and could become too rigid, socially costly, or unsafe.

These tensions help explain why simplistic behavior-change messages fail even when they contain practical truth. Advice to use willpower overlooks the body, environment, and relationship. Advice to practice self-compassion can feel evasive when the person is desperate to stop repeating a consequence. Advice to remove the behavior can ignore the ritual, belonging, or identity it carries. Advice to moderate can underestimate the effect of access and the first use. The data did not support a universal resolution. They supported a process of orientation.

Relationally, the experiment revealed that compulsive patterns can function as strategies of connection and disconnection simultaneously. A person may remain socially legible through memes, drinks, purchases, shared food, or smoke breaks while avoiding the vulnerability of direct need, differentiation, or honest conversation. The behavior can protect against anticipated exclusion while reducing the quality of the connection it preserves. This is consistent with relational-cultural theory's emphasis on the human movement toward connection and the protective strategies that arise when authenticity is expected to threaten belonging (Jordan, 2017).

The findings also expand responsibility beyond an individualistic model. Responsibility was strongest not when context was denied, but when it was accurately named. Participants chose within systems of availability, marketing, social normalization, cultural ritual, withdrawal, fatigue, economic constraint, and relationship. Recognizing these conditions did not remove responsibility. It made response more intelligent. The person could redesign access, prepare alternatives, request support, or decline situations rather than waiting to prove strength at the point of greatest cue exposure.

Existentially, the central conflict concerned authorship. A behavior became problematic when it increasingly decided the person's attention, time, relationships, and effort without renewed consent. The opposite of this automaticity was not an ascetic life without pleasure. It was the capacity to decide what pleasure, rest, connection, and stimulation were for. This distinction matters because many participants feared becoming joyless, boring, old, restrictive, or disconnected. A credible account of change must preserve pleasure and belonging while refusing to let either become the sole authority.

The meaning-and-identity compass emerged as the most integrative response to paradox. Meaning named the life, relationship, contribution, or creation the person wanted to serve. Identity named the way of being through which that life would be built. Together they extended the horizon of choice beyond immediate reward without dismissing the immediate need. They also translated abstract values into behavior: not merely valuing presence, but putting the phone away for a conversation; not merely valuing health, but preparing food before depletion; not merely valuing

integrity, but disclosing a lapse; not merely valuing creativity, but protecting enough attention to make something.

Agency in this account was relational, embodied, and ecological. Bandura (2001) argued that human agency includes intentionality, forethought, self-regulation, and self-reflection while operating within social systems. The present narratives show how those capacities fluctuate with nervous system state, immediate access, relational pressure, and available structure. The group, partner, rule, blocker, prepared substitute, or changed location did not necessarily replace agency; these elements often made agency executable.

Choice Theory and Situated Agency

Choice Theory offers a concise interpretation of the central paradox: the behavior was often an effective short-term strategy for satisfying a legitimate need and an increasingly ineffective strategy for building the life the person wanted. This formulation avoids treating the participants as irrational. It asks what the behavior accomplished and whether that accomplishment justified its cumulative direction. A choice could work for ten minutes and work against a relationship, creative practice, health commitment, or desired identity over months.

The Quality World also helps explain why abstinence could feel like grief. Participants were not only relinquishing an object or application; they were revising pictures of connection, celebration, competence, freedom, pleasure, and selfhood. Some pictures could be preserved through substitution or new ritual. Others required differentiation from relationships or identities that could not accommodate change. The relational-existential foundation extends Choice Theory here by emphasizing that wants are formed and renegotiated within culture, relationship, history, and responsibility to others.

WDEP translates this interpretation into a practical sequence while remaining compatible with phenomenological inquiry. Wants clarifies both immediate need and larger creation. Doing and Direction describes Total Behavior and the trajectory of repeated action. Evaluation asks whether the strategy is working across immediate and cumulative time. Planning identifies the smallest self-authored response and the environmental or relational conditions needed to make it executable. Used in this way, Choice Theory does not imply unlimited control. It describes a disciplined practice of increasing influence over the next response.

Creativity was not a decorative outcome. It represented a shift in the direction of participation. Compulsive consumption placed participants in a largely receptive relationship to novelty, relief, and social information. Creative activity required tolerating the slower uncertainty of making, practicing, organizing, repairing, or relating. In May's (1975) existential account, creativity involves encounter and courage. The return to creative practices in this corpus can be understood as a recovery of encounter: the person becoming available to the world as a contributor rather than only as a consumer.

Finally, the experiment supports a recursive rather than linear model of change. Relapse did not have a single meaning. It could expose an environmental trigger, reveal that a rule was vague, demonstrate the limits of moderation, show that a substitute was insufficient, or identify a social cost the plan had ignored. DiClemente and Crisafulli (2022) describe relapse as potentially informative within successful behavior change. The present corpus adds a phenomenological

observation: what happens after a lapse depends partly on whether the person experiences it as data about a pattern or a verdict about the self.

Table 2 Core Paradoxes and Orienting Questions

CORE PARADOX	LIVED TENSION	ORIENTING QUESTION
The behavior works - and becomes a problem	The immediate benefit is real, but the cumulative cost grows.	What real need is being met, and what fuller response would leave me more capable afterward?
Relief feels like rest	The behavior reduces awareness of distress without necessarily restoring capacity.	Am I trying to disappear from the moment or recover for what comes next?
The behavior creates connection - and disconnection	The ritual protects belonging while sometimes replacing direct intimacy.	What kind of connection am I seeking, and can the relationship develop another way to carry it?
Unrestricted choice feels like freedom	Easy access increases options but can reduce deliberateness.	What boundary would protect my authorship rather than perform punishment?
Pleasure belongs in a meaningful life	The person fears that change requires rejecting joy.	What role do I want this pleasure to have in the life I am creating?
Avoiding discomfort works immediately	Escape lowers distress now and may reduce tolerance or increase cost later.	Which discomfort is asking for care, and which is the price of growth or withdrawal?
Compassion can feel like permission	Shame impairs return, but vague forgiveness can become avoidance.	What response is both kind enough to keep me honest and accountable enough to create change?
Autonomy needs support	External structure can feel controlling while making self-authored choices possible.	What support helps me remember my decision without taking the decision away?
Insight does not guarantee action	The reflective self understands the pattern, while the activated self defaults to habit.	What structure can hold my insight when I cannot easily access it?
Changing means becoming more fully oneself - and losing a familiar self	The old behavior carries identity, nostalgia, status, or belonging.	What am I grieving, and who do I want to practice becoming?
Abstinence can restore flexibility - and become rigid	Clear removal reduces negotiation, but permanent purity may be unsafe or unnecessary.	What level of structure restores choice for this person, behavior, and season?

Implications for Counseling, Education, and Psychoeducation

The findings support several implications for counseling, psychoeducation, curriculum, and public-facing behavior-change work. These implications are interpretive rather than prescriptive and should be adapted to the clinical severity, health risks, culture, resources, and goals of the individual.

1 **Begin with function rather than moral judgment.** Assessment should ask what the behavior reliably changes: anxiety, boredom, loneliness, energy, social confidence, sensory need, task avoidance, ritual, or reward. The behavior's benefit should be named accurately before alternatives are proposed. People are unlikely to release a strategy that is working unless another response can address the same need with an acceptable cost.

2 **Map the relational ecology of the behavior.** Clinicians and educators should explore who participates, who offers, what the ritual communicates, which relationships depend on it, and what the person fears will happen if they choose differently. A plan that ignores hospitality, cultural tradition, workplace norms, partner use, or friendship identity may be technically coherent and relationally unsustainable.

3 **Distinguish relief from restoration.** A useful review examines the full sequence before, during, and after the behavior. This shifts evaluation away from whether the behavior felt good and toward what it left the person able to do, feel, create, or repair. Relief remains legitimate; the question is whether it is the only trusted response.

4 **Prepare for embodied, temporal, and environmental vulnerability.** High-risk moments should be specified in lived terms: after a demanding day, alone on the couch, during the drive, at a family meal, after the first drink, during an unexpected break, or while beginning a difficult task. Environmental design, prepared substitutes, and pre-commitment should be framed as forms of agency rather than evidence of weakness.

5 **Use compassionate accountability after lapses.** The person needs enough safety to disclose what happened, enough curiosity to learn from it, and enough responsibility to revise the plan. Shame should not be mistaken for accountability; it often narrows reflection and drives concealment. Compassion should not be used to erase consequences or avoid recommitment.

6 **Make meaning and identity explicit.** Standard goals such as improved sleep, reduced screen time, health, or savings should be linked to what those outcomes are meant to support. Two questions can organize this process: What do you want to create with your life, attention, energy, and relationships? Who do you want to be in the way you respond to this moment? These questions are especially useful when values conflict and no rule can decide the situation automatically.

7 **Build what is being recovered, not only what is being removed.** Participants benefited when abstinence opened space for movement, art, writing, reading, cooking, friendship, household care, and meaningful work. Recovery plans should identify activities of contribution and encounter, not only distraction. The aim is not constant productivity but renewed participation.

8 **Match the intervention to the behavior and the person.** Nicotine dependence, social media use, food restriction, coffee ritual, and compulsive shopping should not be treated as equivalent. Abstinence may clarify one pattern and intensify risk in another. A history of disordered eating, medical complexity, severe withdrawal, or high-risk substance use requires specialized assessment and may make a self-directed challenge inappropriate. Harm reduction, moderation, medication, medical care, or formal addiction treatment may be indicated.

9 **Preserve the group as a relational container rather than a performance arena.** The class groups were helpful because they normalized difficulty, made the process more engaging, and allowed participants to learn from difference. Group work becomes harmful if it rewards purity,

comparison, confession without safety, or a single definition of success. The goal is honest reflection and supported agency.

10 **Use the five basic needs as hypotheses, not labels.** Counselors and educators can ask whether the behavior may be serving survival or bodily comfort, love and belonging, power or competence, freedom, or fun. The purpose is to enlarge curiosity about function, not to force each behavior into one category or imply that a need explains the full pattern.

11 **Map the Quality World before removing a behavior.** Explore the people, memories, identities, rituals, and images of a good life that the behavior represents. Then ask what must be preserved, grieved, renegotiated, or rebuilt so that change does not require the person to abandon belonging, pleasure, culture, or a coherent sense of self.

12 **Use an expanded WDEP process for paradoxical moments.** Clarify what the person wants immediately and ultimately; describe the acting, thinking, feeling, and physiology occurring now; evaluate both immediate and cumulative effectiveness; and create a specific plan that is within the person's influence, connected to the underlying need, and supported by the environment and relationships.

13 **Protect internal control within relationships.** Support should emphasize listening, encouragement, honest requests, negotiated boundaries, and shared problem-solving rather than criticism, surveillance, coercion, or rescue. The goal is to help the person remain the author of the plan while reducing the burden of practicing it alone.

A Meaning-and-Identity Compass: A Relational-Existential Adaptation of WDEP

The following sequence integrates WDEP with the relational-existential findings. It is designed to preserve the immediate need, the relational context, and the larger questions of creation and identity while moving toward self-evaluation and an executable plan. It is not a diagnostic tool or a substitute for individualized clinical treatment.

The Meaning-and-Identity Compass (expanded WDEP)

WDEP MOVEMENT	PURPOSE AND ORIENTING QUESTIONS
W - Clarify wants and needs	Name both truths. What do I want from this behavior right now? Which need may be active - connection, competence, freedom, fun, or bodily well-being?
W - Reorient toward the Quality World	What relationship, health, work, home, contribution, creative act, or way of living do I want to build? Who do I want to become through the way I respond?
D - Describe Total Behavior	What am I doing, thinking, feeling, and experiencing physiologically? What happened immediately before the urge or action?
D - Name the direction	If this sequence repeats, where is it taking my attention, energy, relationships, health, finances, creativity, and self-trust?
E - Evaluate immediate effectiveness	What did the behavior genuinely provide in the moment? Did it create relief, pleasure, connection, stimulation, comfort, or control?
E - Evaluate cumulative effectiveness	What did it leave behind? Is this strategy helping me obtain what I most deeply want, or only changing how I feel about not having it for a short time?

WDEP MOVEMENT	PURPOSE AND ORIENTING QUESTIONS
P - Choose the smallest congruent action	What specific action can I take now that honors the need without abandoning the larger life or identity I am building?
P - Redesign the conditions	What cue, access point, schedule, replacement, boundary, or supportive relationship would make the next desired choice easier to enact?
P - Review and return	After the choice or a lapse, what did I learn? What should be preserved, revised, or recommitted to without converting the event into an identity verdict?

Limitations to the Study

The most important limitation is methodological status. The source materials were educational assignments, not data collected under a research protocol. No institutional review board approval, research consent process, formal recruitment, or publication-specific confidentiality agreement governed the original exercise. This manuscript must therefore remain an internal scholarly simulation unless the project is redesigned and ethically reviewed.

The corpus was a convenience sample of graduate counseling students and is likely shaped by a relatively high degree of psychological literacy, educational privilege, and interest in helping professions. The findings should not be generalized to the public, to people with diagnosed substance use disorders, or to populations facing different cultural, economic, medical, and social conditions.

The selected behaviors varied substantially in physiological dependence, health risk, cultural meaning, necessity, and diagnostic status. Similar experiential language does not make nicotine, food, social media, coffee, and shopping clinically equivalent. The analysis deliberately focused on shared structures of automaticity, regulation, and meaning, but that focus can obscure crucial differences.

Course evaluation may have influenced the narratives. Participants knew the themes emphasized in instruction and may have shaped their papers toward expected concepts such as dopamine, nervous system regulation, relapse, or empathy. Social desirability, grading concerns, retrospective reconstruction, and a wish to demonstrate growth may have affected what was reported.

The analyst was also the instructor and brought a developed philosophy concerning overstimulation, connection, responsibility, challenge, and meaning. Although direct evidence was separated from interpretation and contradictory cases were retained, the synthesis is unavoidably shaped by this positionality. Independent coding, peer debriefing, an audit trail reviewed by another qualitative researcher, and participant member reflection would strengthen credibility.

The mock-session transcripts were supplementary educational material and are not equivalent to research interviews. They included interpretive statements from the facilitator, some of which contained broad neuroscientific or health claims. Those statements were not treated as evidence, but the interaction itself may have influenced the participant narrative.

The analysis used prior synthesis documents as analytic memos. Although they were not counted as independent data, they may have sensitized the analyst toward previously identified themes and paradoxes. A fully independent reanalysis by researchers unfamiliar with those memos could reveal different structures.

Choice Theory was applied retrospectively as an interpretive framework rather than prospectively embedded in data collection. Participants were not systematically asked about the five basic needs, Quality World pictures, Total Behavior, or WDEP, and most did not use this language. The framework may therefore organize the analyst's interpretation more strongly than the participants' own meaning-making. In addition, Choice Theory can be misused to overstate personal control or understate physiology, dependence, structural power, cultural obligation, disability, and commercial design. The present manuscript attempted to mitigate that risk through the concept of situated choice, but the integration remains theoretical and was not evaluated against alternative models of agency.

Identity-protective de-identification required excluding demographic, cultural, diagnostic, and relational details that would normally support contextual and intersectional interpretation. Short quotations were left unattributed, preventing the reader from tracing themes across individual cases. Privacy was prioritized, but some qualitative transparency was lost.

The duration was approximately one semester, and no systematic follow-up assessed whether changes persisted, whether reintroduction remained intentional, or whether replacement behaviors became problematic later. Self-report was not supplemented by objective use data, validated measures, collateral reports, or clinical assessment.

Finally, the language of addiction was used variably across the corpus. The study cannot determine whether any behavior met diagnostic criteria. The findings concern participants' experiences of compulsion, craving, restriction, and change, not clinical diagnosis or treatment efficacy.

Conclusion

The three-month experiment revealed that removing a highly reinforcing behavior is not merely an act of subtraction. It is an encounter with the internal state, relationship, ritual, identity, and future that the behavior has been helping the person manage. Participants did not simply miss a substance, platform, purchase, or food. They missed relief, inclusion, predictability, stimulation, comfort, and a known way of being.

Change became more possible when this complexity was neither used as an excuse nor erased by moral judgment. Participants needed to acknowledge that the behavior worked, identify the need or Quality World picture it served, examine what it cost across time, and take responsibility for creating more effective conditions and responses. Choice Theory names this as self-evaluation rather than condemnation: the central question is not whether the person is good, disciplined, or worthy, but whether the current strategy is helping them move toward what they want.

The most enduring orientation was not a rule against use. It was a pair of questions: What do I want to create with my life, attention, energy, and relationships? Who do I want to be in the way I respond? WDEP gives those questions behavioral form by asking what is wanted, what is being done, whether it is working, and what plan will be practiced next. The relational-existential foundation keeps the process connected to belonging, responsibility, grief, meaning, and contribution.

The central phenomenological conclusion is that agency is the practiced capacity to return. A person may return to the body after dissociation, to relationship after concealment, to a task after

avoidance, to a boundary after a lapse, or to a desired identity after automaticity. Choice is not presented here as absolute control. It is the gradually strengthened capacity to recognize what one is trying to obtain, evaluate whether the current strategy is effective, and participate in a more congruent next response. In that sense, recovery is not the elimination of need or pleasure. It is the reclamation of authorship in connection.

References

Bandura, A. (2001). Social cognitive theory: An agentic perspective. Annual Review of Psychology, 52, 1-26. https://doi.org/10.1146/annurev.psych.52.1.1

DiClemente, C. C., & Crisafulli, M. A. (2022). Relapse on the road to recovery: Learning the lessons of failure on the way to successful behavior change. Journal of Health Service Psychology, 48(2), 59-68. https://doi.org/10.1007/s42843-022-00058-5

Frankl, V. E. (2006). Man's search for meaning. Beacon Press. (Original work published 1959)

Glasser, W. (1998). Choice theory: A new psychology of personal freedom. HarperCollins.

Jordan, J. V. (2017). Relational-cultural therapy (2nd ed.). American Psychological Association.

Kitzinger, R. H., Jr., Gardner, J. A., Moran, M., Celkos, C., Fasano, N., Linares, E., Muthee, J., & Royzner, G. (2023). Habits and routines of adults in early recovery from substance use disorder: Clinical and research implications from a mixed methodology exploratory study. Substance Abuse: Research and Treatment, 17, 11782218231153843. https://doi.org/10.1177/11782218231153843

May, R. (1975). The courage to create. W. W. Norton.

Moustakas, C. (1994). Phenomenological research methods. SAGE.

van Manen, M. (2016). Researching lived experience: Human science for an action sensitive pedagogy (2nd ed.). Routledge.

Wubbolding, R. E. (2011). Reality therapy. American Psychological Association.

Yalom, I. D. (1980). Existential psychotherapy. Basic Books.

Data Availability and Privacy

Data availability and privacy: The source documents are confidential educational materials and are not publicly available. Names, pseudonyms, and identity-linked details were intentionally excluded from this manuscript.