The Relapse Process

By Peggy L. Ferguson, Ph.D.

The relapse process often looks like this: We are attending meetings, talking to people in the program, using daily meditation time where we are improving our conscious contact with God as we understand Him. We are working a program of recovery and experiencing some benefits of abstinence. We feel better physically, emotionally, spiritually.

Much like when we begin to feel better after taking antibiotics, we stopping taking them before we complete the prescription. Of course, whatever it was that you were prescribed antibiotics for, has not been resolved and your symptoms return. In the same fashion when we let up on recovery activities and regimens, (like going to meetings, talking to people in the program, using a sponsor, exercising daily, etc., ) we begin to have a return of "symptoms".

In addiction, those symptoms involve a change in thinking. Old defense mechanisms return that make it ok to let up on recovery activities, to return to risky places, people, situations. A change in feelings also occurs, including irritability and anger, extra-sensitivity to hurts/slights, and fear (among others). When we are not mindful of our thoughts and feelings, we are not processing them and dealing appropriately with them. Instead we may be stuffing feelings, acting them out, or using some other obsessive compulsive behavior to numb them out. All the while we would be using the same distorted thinking processes we had in active addiction, to tell ourselves that we are correct and justified in our behavior.

The return to old thinking and old feelings can go unrecognized by yourself for a long period of time before you finding yourself seeking out old high risk environments and people. We develop a mind-set that either tells us, "Why not? Might as well…", that we have somehow magically regained "control", or that it is no one's business but our own. People are typically in the relapse process some period of time before they take that first drink/joint/pill. Unless you are actively monitoring your own relapse symptoms (and sometimes even then), you cannot tell that you are in the relapse process.

Accountability helps with relapse prevention. Others close to you can often tell that you are heading for relapse long before you take the chemical. Listen when they tell you that they see you acting like you did before recovery. Relapse is predictable and preventable. At any point in the relapse process you can interrupt the progressive slide into return to using, by stepping up your recovery activities and asking for help.

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