

Don't Let Grief Derail Your Transition Into Recovery

By Peggy L. Ferguson, Ph.D.

One of the common experiences of the earliest efforts toward quitting drinking and becoming sober, is grief over the loss of the chemical. For many people with an alcohol or other drug problem, the chemical, (whether it is alcohol or oxycodone) has become the addict's best friend and constant companion. When this best friend is given up, the alcoholic/addict experiences grief.

The chemical plays all kinds of roles in the alcoholic's life and these roles are necessary and meaningful. The chemical that comes to occupy those roles almost exclusively, eventually turns on you, and brings about its own escalating set of natural negative consequences. Because the chemical has played such vital functions in the life of an alcoholic/addict over time, the alcoholic/addict is heavily invested in maintaining the relationship with the chemical. The alcoholic does not want to give up his/her best friend. As the negative consequences of drinking or using other drugs keep piling up, emotional comfort with continuing to drink requires a certain amount of psychological fancy footwork, otherwise known as defense mechanisms.

There are a number of defense mechanisms that alcoholics and addicts deploy in early recovery. "Denial" is the one that most people are aware of. "Denial" seems to have become generalized to describe all defense mechanisms in addiction. Examples of denial would be "I am not an alcoholic," "I only take prescription drugs so I am not an addict," "I am not an alcoholic because I only drink beer/wine." Rationalization is about coming up with reasonable, rational explanations for why you drink, such as "I drink because I have social anxiety and it helps me be more outgoing," "I drink because I am lonely and I don't mind so much when I'm drinking." Minimization is about playing down the amount, frequency, or consequences of the drinking/using, such as "I only drink on weekends," "I don't drink like Larry. If I ever do, I'll quit," "I have never had a DUI." These are just a few of the defense mechanisms. In essence, defense mechanisms allow you to continue to drink/use in the face of the negative consequences by psychologically making it ok to do so. Defenses also assist with chasing an illusion of control. The person who is at the beginning of recovery, may still be spending a lot of energy with deciding whether to drink or not drink, and in evaluating the choice, bolsters the argument for drinking with continuing to rationalize and chase the illusion of control.

Most people at the very beginning of recovery, have a lot of ambivalence about quitting. On the one hand, they are beginning to see problems caused by the drinking and on the other hand, they continue to perceive benefits from continuing to drink—just without the problems. They are hoping that they are blowing things out of proportion and that they still really have control over their drinking, if they just make better rules, strategies, or drinking companions.

Loss of control defines addiction. People often think that you must have loss of control each and every time that you drink to experience "loss of control". By that

standard, successfully having two drinks at happy hour after deciding to do so, would confirm that one is not alcoholic. Such is not the case. Alcoholics can have such drinking episodes that do not appear to be out of control to themselves or to others. If you cannot predict with any reliability—after the first drink, how many more drinks there will be or what will happen, your drinking is out of control.

To gain control over your drinking/using, you must stop drinking and/or using other drugs. Facing this reality can feel like punishment and it usually feels like a terrible loss. Grief over the loss is very common in early recovery. Many people also feel depressed at this time. While many of the drugs of abuse, (alcohol included), actually cause depression, common symptom of detox, (a neurochemical process), involve symptoms of depression. For many people, the depression will subside by itself within a relatively brief period of time. For others, an antidepressant may be appropriate. Similarly, anxiety, another common early recovery symptom, may also go away by itself or be improved by an antidepressant, especially one of the SSRIs.

Depression and anxiety are two of the most common conditions that alcohol and other drugs are used to medicate. Depression and anxiety, are typically therapeutic targets, where new living skills are learned as healthy replacements for the old chemical solution. New skills and healthy alternatives serve as recovery replacements for the chemical and provide relief from the symptoms. Some of those healthy replacements might include: socializing, exercise, diet/nutrition, 12 step meetings, improving self-esteem and self-efficacy, replacing worry with effective problem solving, etc. All these new living skills are acquired through working a program of recovery, identifying problem areas that need remediation and setting about to deliberately acquire new skills.

Many people are motivated to seek recovery when the pain of continuing to drink (and its consequences) is somewhat greater than the fear of quitting. There really is life after addiction and the grief goes away. While many alcoholics approach quitting drinking with fear, grief, and resentment, it isn't too long before these feelings are replaced with gratitude for recovery, restoration of relationships, and a return to physical, emotional/psychological, financial, and spiritual health.

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