

Chapter 18

*W*hat is the Process of Relapse?

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*Our lives improve only when we take chances and the first and most difficult chance we can take is to be honest with ourselves.*

-Walter Anderson

*When discussing relapse*, it's important that we first make a distinction between relapse as an event and relapse as a process. Relapse, as an event, is the act of returning to the consumption of alcohol and other drugs after a period of abstinence. Relapse, as a process, however, is a much more complex phenomena.

Relapse, as a process, is the progressive uninterrupted degradation, erosion, and eventual decay over a period of time of one's Recovery-based lifestyle. This progressive, downward, out-of-control spiral is caused by the experience of either acute or chronic, unrelieved emotional, physical, and/or spiritual pain. This emotional, physical, and/or spiritual pain is caused by the presence in your life of activated personal stressors.

It will seldom be obvious to you that the process of relapse has been activated once you're stuck in the middle of it. Often times, only in hindsight, after much damage has been done, can you see with any clarity where, when, and how the process of relapse had been activated. Hopefully, by becoming more aware of the signs and symptoms of the process of relapse, you'll be able to evaluate the risk of where you're at physically, emotionally, and spiritually at any particular moment so that you may take the action steps necessary to alleviate the symptoms and extinguish the activated process of relapse.

Remember, the process of relapse is the progressive deterioration over a period of time of your Recovery-based lifestyle. With that in mind, the signs and symptoms of the process of relapse are the deterioration of those elements that make up your Recovery-based lifestyle.

## Pathfinder's Checklist

*Signs and symptoms that the process of relapse has been activated.*

- 1) Deterioration of your physical well-being:
  - a) Consumption of alcohol and other drugs
  - b) Participation in compulsive behaviors
  - c) Neglect of self-care
  - d) Neglect of stress management
  - e) Mismanagement of Post Acute Withdrawal Symptoms
  
- 2) Deterioration of your psychological well-being:
  - a) Abandonment of Recovery-based belief system
  - b) Resumption of using-based thinking
  - c) Renunciation of Recovery-based behavior
  - d) Chronic unresolved emotional pain such as depression, anxiety, grief, shame, and/or restlessness
  
- 3) Deterioration of your social well-being:
  - a) Degradation of Recovery-based living, work, and/or leisure environments
  - b) Severance with Recovery-based support system
  - c) Abandonment of Recovery-based relationships
  - d) Deterioration of daily Recovery-based structure due to lack of practicing daily routines and rituals
  
- 4) Deterioration of your spiritual well-being:
  - a) Overreliance on willpower
  - b) Rejection of Higher Power
  - c) Termination of working a Twelve Step Program
  - d) Rejection of rituals associated with your spiritual

practice

e) Prolonged periods of feeling hopeless

Hopefully, by completing the exercises throughout this book, you're becoming more aware of not only your personal stressors that might activate the process of relapse, but what the deterioration of those building blocks that make up your Recovery-based lifestyle would look and sound like if the process of relapse were to be activated.

To supplement what you've already learned to this point in time about your personal stressors and the process of relapse, let's use this chapter to sharpen the picture of the relapse cycle as it's activated and unfolding. My hope for you is that you'll be able to identify and acknowledge to yourself the slippery slope that you may find yourself on if the relapse cycle were to be activated. By acknowledging to yourself the slippery slope that you may be on, you'll better be able to choose to apply the brakes to your free fall before you begin to consume alcohol and other drugs.

## Pathfinder's Checklist

### *The process of relapse.*

- 1) Presence of a circumstance that has embedded in it a potentially activated or activated personal stressor.
- 2) Denial of the danger of the circumstance or denial of the circumstance altogether (denial can take on the form of blame, justification, rationalization, minimization, apathy, intellectualization, projection, discounting, or out and out denial).

- 3) If the circumstance is acknowledged, application of a self-sabotaging coping mechanism such as avoidance, emotionally shutting down, involvement in compulsive behavior, willfulness, acting-out feelings, isolation, and/or compartmentalizing your life.
- 4) Intensification and perpetuation of emotional and spiritual pain caused by denial of the stressor or application of a self-sabotaging coping mechanism that exacerbates the emotional and spiritual pain caused by the stressor.
- 5) Intensification and perpetuation of emotional and spiritual pain lead to the decay of your Recovery-based belief system, thinking, behavior, and management of emotions.
- 6) As your Recovery-based belief system, thinking, behavior, and management of emotions deteriorate, you begin to [re]adopt your using-based belief system, thinking, behavior, and management of emotions.
- 7) As your Recovery-based belief system, thinking, behavior, and management of emotions deteriorate, you become more reliant on self-sabotaging coping mechanisms such as defensiveness towards others, avoidance, isolation, impulsiveness, acting-out, and compulsive behavior as a means of coping with the ever-increasing existing emotional and spiritual pain as well as the presence of newly activated stressors.
- 8) As your emotional and spiritual pain increases and your ever-increasing reliance on denial and other self-sabotaging coping mechanisms continues,

your Recovery-based lifestyle will begin to deteriorate. Your Recovery-based environments will begin to deteriorate. You'll start to pull back or cut yourself off altogether from your Recovery-based support system and relationships. You'll begin to feel itchy and perhaps [re]associate with using friends or seek to acquire alcohol and other drugs. Your daily structure will begin to break down as you stop praying or meditating, stop going to meetings, sleep more and more or less and less, isolate, revert to secrecy, compartmentalizing your life, stop maintaining your personal hygiene, stop maintaining the upkeep of your home, stop reaching out to others and/or stop returning phone calls. Self-care will become less of a priority. Acting in a responsible, dependable, accountable fashion at home, work, school, and/or other activities will begin to deteriorate.

- 9) As your Recovery-based lifestyle begins to deteriorate your emotional and spiritual well-being will begin to worsen. You'll begin to experience feelings of depression and hopelessness. Apathy will begin to dominate your attitude towards Recovery. You'll begin to feel more and more overwhelmed with feelings of self-pity, anger, unhappiness, grief, loneliness, and resentment.
- 10) Once your mood becomes dominated by anger, depression, anxiety, loneliness, and/or apathy you'll begin to see less and less options for how to cope with the demands of life in general and abstinence in particular.
- 11) As your perception of your options narrow, your

ability to remain honest with yourself about being chemically dependent will lessen as well. You'll begin to convince yourself that you don't really have an alcohol and other drugs problem and/or that you can learn how to consume alcohol and other drugs socially or that you really don't care anymore whether or not you remain abstinent.

- 12) As this uninterrupted internalization of emotional and spiritual pain continues and your using-based belief system and thinking take over, you'll eventually see consuming alcohol and other drugs as a viable option for relieving the emotional and spiritual pain that you're experiencing.
- 13) As you are less able to see other options than consuming alcohol and other drugs, as your using-based thinking distorts how you think about your relationship with alcohol and other drugs, as you isolate from your Recovery-based support system, as your Recovery-based environment deteriorates, as your desire to rely more on your willfulness and less on your relationship with your Higher Power, as your emotional and spiritual pain increases, as consuming alcohol and other drugs to relieve your emotional and spiritual pain becomes more and more of an option, as you turn further and further away from your Recovery-based coping mechanisms, you'll choose to consume alcohol and other drugs.

What does the above list look like in practical terms? Let's examine the events that unfold once a personal stressor has been activated.

First, imagine the activation of a stressor(s). Perhaps:

- 1) *Physical*, such as acute withdrawal symptoms or Post Acute Withdrawal (PAW) symptoms or perhaps some chronic physical pain, or the sense of being tired or hungry.
- 2) *Emotional*, such as feeling overwhelmed by a sense of grief from no longer drinking and drugging, or lonely because you can no longer be around your old using friends, or unhappy about the state of your life.
- 3) *Psychological*, such as beginning to believe that you can snort cocaine because marijuana was your drug of choice, or beginning to believe that you can learn how to drink normally, or thinking that your alcohol and other drugs use was never as bad as people said it was.
- 4) *Social*, such as not living in an environment clean of alcohol and other drugs because your husband refuses to stop drinking at home or continuing to hang out with your using buddies.
- 5) *Spiritual*, such as feeling overwhelmed with a sense of hopelessness, willfulness, or pride.
- 6) *Intrapersonal*, such as feeling ashamed of who you are and what your life has become.
- 7) *Interpersonal*, such as feeling overwhelmed by the demands of marriage without using alcohol and other drugs as a device to distance yourself.

Now double and triple that feeling if two or more of those stressors are activated at the same time. Imagine what might occur if that discomfort persists and/or compounds.

When you experience persistent unrelieved emotional, physical, and/or spiritual pain, you'll eventually need to do something to make that discomfort go away. Eventually, you'll seek some sort of relief from the ongoing experience of emotional, physical, and/or spiritual discomfort.

Now let me be clear. The discomfort that you experience is not the culprit here. That's just life. You can't avoid that from happening no matter whether you're clean and sober or under the influence of alcohol and other drugs. No, what's critical at this point is not the discomfort that you may be experiencing but whether you apply Recovery-based or self-sabotaging coping mechanisms as a way of preventing, eliminating, and/or alleviating that discomfort.

Follow my train of thought for a moment by taking a walk down each path. First, we'll look at applying Recovery-based coping mechanisms and then we'll take a look at applying self-sabotaging coping mechanisms.

If you cope with the presence of an activated stressor that is making you feel stressed out or overwhelmed by taking a quiet time, meditating, or praying, you'll likely feel *relieved* of your burden.

If you cope with the emotional impact of grief and mourning by going to a Recovery-based support group meeting or talking to others, you'll likely feel *supported*.

If you cope with the impact of feeling lost and hopeless by *Letting Go and Letting God*, you'll likely feel *less responsible* for the outcome of the particular circumstance that is the precipitant for the stress you're feeling.

If you cope with the physical discomfort of pain by applying pain relieving visualization techniques, you'll

likely experience *relief from the physical discomfort* you're experiencing.

If you cope with the intrapersonal pain felt from feeling shame-based by practicing daily affirmations, you'll likely begin to *feel better about yourself*.

If you cope with interpersonal pain by resolving conflict with your partner by applying conflict resolution skills, you'll likely experience a *sense of serenity and harmony*.

Now, let's look at the other side of the coin. What if you applied self-sabotaging instead of Recovery-based coping mechanisms as a way of coping with the impact of chronic, persistent, unrelieved, activated stressor(s) in your life? Imagine how you might cope if you chose self-sabotaging rather than Recovery-based coping mechanisms. Withdraw? Shut-down? Sabotage? Create crisis? Participate in other compulsive types of behaviors? Escape? Use food as a source of comfort? Deny? Blame? Feel sorry for yourself? Consume alcohol and other drugs? Imagine what might unfold if you relied on old self-sabotaging coping mechanisms rather than some of the Recovery-based coping mechanisms I suggested above?

For instance, if you relied on *denial* to cope with the activation of a stressor and its impact on your emotional and spiritual well-being, you may deny the existence of the stressor or deny its impact on you or deny your responsibility for solving the problem(s) precipitated by the presence of the stressor(s).

If you relied on *blame* to cope with the activation of a stressor and its impact on your emotional and spiritual well-being, you may blame another person for the pres-

ence of a stressor and, in so doing, convince yourself that there's nothing for you to do differently other than to wait for the other person to change their behavior.

If you relied on *minimization* to cope with the activation of a stressor and its impact on your emotional and spiritual well-being, you may minimize the importance of the presence of the stressor or you may convince yourself that the stressor and its impact on you is nothing to be concerned about.

If you relied on *avoidance* to cope with the activation of a stressor and its impact on your emotional and spiritual well-being, you may likely successfully convince yourself that there's no problem because you've already solved it—tomorrow that is.

If you relied on *intellectualization* to cope with the activation of a stressor and its impact on your emotional and spiritual well-being, you may learn about the problem, learn about the solution, investigate who is best qualified to solve the problem for you but never do anything to eliminate the problem or never apply the information that you have so well learned.

If you relied on *rationalization* to cope with the activation of a stressor and its impact on your emotional and spiritual well-being, you may convince yourself that the presence of the stressor in your life is a good thing and therefore there's no need to do anything about the stressor, or convince yourself that the stressor will go away by itself by the occurrence of some random chain of events—none of which are of your own making.

Can you see how the application of the above-mentioned self-sabotaging coping mechanisms actually may enable you to ignore but never successfully resolve the

activation of the stressor, the stressor's impact on your emotional and spiritual well-being, and your responsibility for eliminating the stressor? It's unlikely that self-sabotaging coping mechanisms will positively resolve the activation of the stressor in any of the ways that I suggested above when discussing the application of Recovery-based coping mechanisms.

Can you see how the application of any one of the above self-sabotaging coping mechanisms is a formula for perpetuating rather than eliminating the activated stressor? Can you see how perpetuating the activated stressor can only increase rather than lessen your sense of emotional and spiritual discomfort?

What impact might feeling overwhelmed by a set of stressors have on your Recovery-based belief system? How might your Recovery-based thinking be altered by the level of stress that accompanies feeling overwhelmed? What does the presence of unrelieved emotional and spiritual pain do to your resolve to apply Recovery-based rather than self-sabotaging-based coping mechanisms to the day-to-day circumstances of your life?

As a result of the chronic presence of activated stressors, combined with your ever-increasing sense of emotional and spiritual dis-ease, combined with your ever-increasing reliance on self-sabotaging rather than Recovery-based coping mechanisms, you may eventually alter or abandon altogether the routines, rituals, and practices that you've developed to maintain your Recovery-based lifestyle. You may begin to spend less time with those people who supported and honored your Recovery. You may begin to once again frequent those places that posed a danger to your Recovery. As any one or all aspects

of your Recovery-based lifestyle begin to alter, the security that your Recovery-based lifestyle offered you will be greatly undermined.

As this downward out of control spiral continues to unfold, your life will constrict and narrow. You may cut yourself off from Recovery resources. You may find yourself being less honest with yourself and others. You may find yourself reverting back to your old ways of wheeling and dealing in order to make your life more rather than less manageable.

All of this may lead to an escalation of the destruction of your Recovery-based lifestyle. Unmanageability increases. Isolation deepens. Despair and hopelessness intensify. As apathy, fear, and willfulness begin to dominate your mood, you'll begin to shut-down and disconnect from your support system. Where once you could clearly see the choices you had when you were momentarily feeling overwhelmed, now all you can see is an ever-narrowing range of options.

And soon the only choice you'll see in front of you is to go back to consuming alcohol and other drugs. Sadly for all too many individuals, there are those who choose an even more self-destructive path than relapse. There are those who choose insanity, suicide, or another form of death as the means of escaping this self-destructive cycle.

But this doesn't have to happen to you. You can interrupt and/or stop altogether the process of relapse. How? By being proactive in how you manage your personal stressors. And the best way to manage your personal stressors is to create a thorough all encompassing relapse prevention plan.