

**Addiction and Recovery:
Learn From Your Recent Relapse
By Using "The Relapse Assessment Worksheet"
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Relapse is a symptom of addiction. Relapse is a symptom of many, if not most, chronic diseases. Addiction should be treated as the chronic disease that it is and relapse should be treated as a symptom of addiction. Relapse is not a character flaw or a moral failing. When you think of addiction as a chronic illness, you must conceptualize treatment and recovery from the same world view.

In any other disease, when someone relapses, the sufferer or patient does not typically just give up, go hide somewhere and die. They go back to the doctor for a medication change or for further instructions on what to do next. They may step up their treatment regimen, alter it, or let reassessment guide treatment planning.

With other chronic diseases, family members typically do not just give up on the patient either. When treating other chronic diseases there is an expectation that relapse serves as a reminder and a wakeup call, to assist the patient in taking whatever action is necessary to get their recovery back on track.

For people in addictions recovery, getting back on track means going back to meetings, possibly going back to some level of treatment, and renewing one's commitment to honesty, open mindedness and willingness to do whatever is necessary to recover. It means evaluating the effectiveness of your efforts before relapse, and identifying realistically what your efforts should be at this point in recovery. It usually involves looking at what was and was not working. Much of the time the recovering person was in the relapse process quite some time before he or she actually used the chemical.

As you recall, the relapse process involves a return to old thinking, old feelings, and old behavior. Sometimes when people relapse, they had either cut back or entirely stopped attending meetings, using prayer and meditation, going to counseling, and using program solutions to life's daily ups and downs. They may have embraced self-pity. They probably began to entertain relapse thinking, where permission to relapse (though unconsciously) is granted to oneself. Before the chemical is consumed the recovering person has usually stopped doing many of the things that he was doing that allowed him to achieve sobriety in the first place. Many people stop doing the very behaviors that improve their health and wellbeing as soon as they feel better, only to discover that their symptoms soon return. Alcoholics/addicts in recovery are no different on this score.

Those who have relapsed can use their relapse to strengthen their recovery. They can review their efforts before relapse and make a plan to increase those efforts to an appropriate level. "Half-measures avail us nothing." (AA Big Book, p).