

## Chapter II My Relapse Prevention Plan

At any fork in the road, one branch leads toward a stronger sobriety, and the other leads ultimately toward relapse. Most of the exercises in this workbook have tried to shed light on the many varieties and flavors of this basic choice. If you have the luxury of always doing an exhaustive Sobriety Priority T-chart analysis before every decision in your life, and if you have uncommonly sharp foresight, you may never need to put together a relapse prevention plan. Similarly, you may never need a smoke detector or a fire extinguisher.

However, in real life people sometimes make decisions first and do the analysis afterward. Situations also come up where people seem to be going in a circle and cannot see a fork in the road that would lead to new ground. At times like these, it's useful to be able to recognize a relapse-bound path or a near-relapse situation. You may then be able to make timely corrections and avoid the crash, or at least minimize the impact and limit the damage.

If a relapse does happen, it can be a valuable educational experience for all involved. One utility of a support group is to serve as a living laboratory where people try different action plans and share the results with one another. A relapse that happens in isolation is a terrible waste. This chapter includes exercises that the person who has relapsed could work by way of getting a deeper understanding and sharing the lessons of the experience.

### *I How and Why I Stopped*

Sometimes a near-relapse situation arises because the person never understood or has forgotten why they stopped drinking/using to begin with, or because the situation has changed so that those reasons no longer obtain.

- \_\_\_ One day it just came to me out of the blue that I had to stop and I did
- \_\_\_ One day something dramatic happened and I stopped

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- I had been sick and tired of drinking/using and thinking about stopping for \_\_\_\_\_ (time)
- There was a series of events that led up to my stopping
- I came to the decision to stop all by myself
- Other people played a role in my decision to stop
- Members of my family asked me to stop
- A doctor or other professional told me to stop
- I thought if I did not stop, certain bad things would happen to me
- I thought if I did stop, certain good things would happen

The main ideas in my mind originally when I stopped drinking/using were:

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Do the reasons why I originally quit no longer hold? (For example, has the person who urged me to get clean and sober left my life? Has my medical diagnosis changed?)

- The original reasons are gone
- The original reasons are still there
- Some of the original reasons are still there, others have gone

Now that I have been clean and sober for some time, is my understanding of the reasons for staying clean and sober broader and deeper than it was originally?

- Yes, I see more now
- No, my understanding is less deep than it used to be
- It is the same

If yes, what reasons to be clean and sober do I see now that I did not see originally?

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If no, what part of my original reasons for staying clean and sober have I tended to forget about?

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Note that there are daily exercises that can be used to keep alive the memory of one's original reasons to get clean and sober; see Page 55.

## *2 People Say: My Desire To Stay Clean and Sober*

Some people get into relapse trouble early on because their desire to be clean and sober is nonexistent, or has faded, or flickers, or is thin and abstract. Some people pass through a period of craziness where they feel the desire to be clean and sober only when they are drinking/using, but when they are clean/sober, all they can think about is their next drink/hit. It may take a while for the point to sink in that purposeful actions, not merely wishes, make a recovery. As with any difficult learning project, misconceptions, false starts and mistakes are common at the start; and some of them result in relapse. Try this checklist:

- I don't feel any desire within me to stay clean and sober; I'm only doing it because I have to
- I feel a desire to stay clean and sober but it is so small that sometimes I can't find it
- I feel a sharp desire to stay clean and sober sometimes but I can't hold on to it
- When I feel the desire to stay clean and sober I try to lock on to that feeling and hold it
- I feel a strong desire to stay clean and sober most of the time
- The desire to stay clean and sober is my normal feeling, anything else is exceptional
- I do feel a desire to stay clean and sober but it's only "in my head" and not "in my gut"
- My desire to stay clean and sober is both in my gut and in my head; when I smell alcohol or drugs I gag or feel nauseous and I get away as fast as I can
- I only feel the desire to stay clean and sober when I've started drinking/using; when I'm sober I mainly feel a desire to drink/use
- I don't feel anything positive about drinking/using any more; if I were to go back there it would be because I wanted to destroy myself
- While I'm drunk/high I spend a lot of time planning my sober life; when I sober up/come down I forget all about it
- I'm so glad I'm not drinking/using any more; it had become crazy-making
- I read recovery books while I'm drunk/high, so drinking/using is part of my recovery
- I feel sad and relieved when I read books about active alcoholics/addicts – sad for them, relieved that I'm sober now
- I feel that I have permission to drink so long as I feel a wish to stay clean and sober
- Once I actually stopped drinking and using, I understood on a gut level that this was the only way for me to live
- As long as I attend recovery groups it's OK for me to continue drinking/using
- My brain was a mess of rationalizations and self-deception until I gave myself a kick in the pants and actually stopped

- I want to stay clean and sober, provided it doesn't mean I have to stop drinking and using
- Staying clean and sober has become the most important priority in my life
- I might feel a stronger desire to be clean and sober if I felt I had more reason to be alive
- I might feel more reason to be alive if I were to stop drinking/using
- When I feel the desire to drink/use I act on it immediately, but when I feel the desire to stay clean and sober I ignore it until it goes away
- When I feel the desire to stay clean and sober, I act on it immediately, but when I feel the desire to drink/use, I procrastinate and don't act on it
- I don't know any ways to fulfill any of my desires
- I know ways to fulfill other desires, but not my desire to be clean and sober
- I have no desire to stay clean and sober but I do it anyway because I fear the consequences if I don't

### ***3 Thinking About the Desire to Be Clean and Sober***

Obviously, if a person has no desire to be clean and sober, they will relapse at the next opportunity. Some people in prisons, hospitals or similar settings where alcohol/drugs are difficult to get on short notice – or where penalties for use are prohibitive -- may be abstinent in their behavior, but mentally they remain drinkers/users. Their drinking/drugging is merely on hold. They are not counting up the days of their sobriety; they are counting down the days until they can drink/use again.

Do you think that a period of enforced abstinence can nevertheless work to bring about recovery, if it awakens a person's own desire to become clean and sober? As the French say, sometimes the appetite comes with the eating. Have you seen instances where enforced abstinence has worked? Have you seen examples where it did not work? What do you think accounts for the outcomes you saw?

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Sigmund Freud divided the human personality into three parts: id, ego and superego. The id is the seat of instincts, desires and pleasures; it says "I want." The ego is the seat of rational, self-interested calculation; it weighs the alternatives and concludes "I will." The superego is the voice of society's mores and taboos; it says "you should" or "you must." Assuming that you see some usefulness in this scheme, where do you feel your desire to get clean and sober comes from? Where do you feel your desire to drink/use comes from? Do you see some threads of your sober striving that come from the id? (See the section on "Recapturing Pleasure" in the My Feelings Chapter, at Page 103.) From the ego? Conversely, when you look at your desire to drink/use, do you see some parts of it that come from the superego? (Check the "My Culture" chapter.) From the ego? Do you see an advantage, in terms of relapse prevention, to having your sobriety anchored in all three areas?

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The desire to get clean and sober often forms in the mind long before the person takes action on it. Was this true in your case? How long did you feel a desire to be clean and sober before you first actually stopped drinking/using?

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Can you see how a desire to relapse can also form in the mind long before the person takes action to relapse? \_\_\_\_\_

Have you had arguments in your mind between your desire to be clean and sober, and your desire to drink/use? Describe some of these arguments: what were the voices, and what did they say? Did you take any action that revealed your inner struggle, such as going into a store to buy, and leaving without buying? Write about these experiences here:

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Do you agree that one cannot force a person to want to be clean and sober? What kinds of things, in your experience, increased your motivation to be clean and sober? What kinds of things impaired that motivation?

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Do you feel more motivated or less motivated to do something if you are told that you have to do it? Do you like to have choices?

## 4 When Someone Else Has Relapsed

Sometimes people get into relapse danger because someone they looked up to as a model has relapsed; this occurs, for example, when a sponsor in a 12-Step group relapses. In any support group, a member's relapse can tug the other members downward, just as their support will tend to pull the falling member upward. Think of mountaineers roped together on a slope. Which of these reactions applies to you?

- That person's relapse created a pull on me in the relapse direction
- I distrusted this person and their relapse has made my sobriety, if anything, stronger
- I don't feel affected one way or the other
- I was not surprised this person relapsed; I saw it coming
- This person relapses all the time, it was nothing new
- I could have done something to maybe prevent this person from relapsing
- Someone else could have done something to maybe prevent this person from relapsing
- The group could have done something to prevent this relapse
- Nothing could have been done to keep this person from relapsing
- This person's relapse has upset and shocked me
- I want this person to come back to the group and try again
- I'd just as soon this person didn't come back into the group
- I have learned something useful for my own recovery from this person's relapse

If you have had the experience of dealing with the relapse of someone in your group, you may have had occasion to reflect on the deep issues that arise from the social nature of human beings. No one is an island, but connectedness can be painful. If the relapse is serious and involves loss of life, you may be reminded that staying clean and sober is not an abstract issue, it has to do with survival.

If you have experienced someone else's relapse, write about how this has made you feel and what you learned from the experience:

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Can you ever help a person who relapsed by following them into relapse? If you relapse out of "sympathy" with such a person, what effect will that have on them?

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In view of the probability that someone in your support group will experience a relapse at some time, do you think you are better off working on your recovery in isolation?

\_\_\_\_\_ Can you see advantages to being part of a group experience that sometimes includes someone's relapse? \_\_\_\_\_ If you are able to be of help to someone who is in danger of relapsing, or who has relapsed, how does this make you feel about yourself? \_\_\_\_\_ Does helping someone else also help you?

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What if you are a member of a group in which the great majority of people relapse? Should you just accept this as the nature of the beast, and struggle on to become one of the handful of survivors? Should the group's standards of admission be raised? Should the group's approach be re-examined to see in what way it might be made more effective for more people? Should you give up on that group? Should you give up on groups in general? Discuss:

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1 Decision  
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## 5 Expectations About Relapse

As with anything else, your expectations will influence your outcomes. If you believe that relapse is inevitable, it probably will be. Here is a short checklist to help you spot arguments that, in some people's minds, create an expectation that they will relapse or that they ought to relapse.

- I believe that everyone who gets into recovery inevitably relapses
- I believe that some people will relapse, some people won't, and it's beyond their control
- Relapse just happens, like sh\*t, and there is no point in trying to figure anything out about it
- Statistics show that relapse is common, so it will probably happen to me
- Addiction is a relapsing disease and I have it, therefore I will relapse
- The disease progresses no matter what you do, so relapse is inevitable
- I have no control over my addiction so I am bound to relapse eventually
- Relapse is a punishment for being a defective person, and I am one
- I would have to work a perfect recovery program to avoid relapse, and I can't
- When it comes to alcohol and drugs I am basically paralyzed, so relapse is inevitable
- Unless I work X program I am doomed to relapse, but X makes no sense to me, so I will end up relapsing
- Unless I do my recovery the way Z did his recovery, I will inevitably relapse, but I can never be like Z, so I am bound to relapse
- Relapsing is what alcoholics/addicts do, and I'm one
- Other:

\_\_\_\_\_

\_\_\_\_\_

If you have checked one of the items in this list, use the space below to write a counter-argument. This could be a good topic for group discussion.

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In engineering, "redundancy" means having a back-up system and is an important safety feature. Can you see how having more than one recovery approach available can be a good thing for relapse prevention? \_\_\_\_\_



## 6 Termites That Prepare the Mind for Relapse

To paraphrase another Yogi Berra expression: Ninety per cent of relapse is half in the mind. Here is a collection of notions that sometimes take up residence in the mind of a person in recovery and gnaw away at the foundations. Each of them has a plausible introduction, but a shaky conclusion. If one of these troublemakers is at work in your head, put a check mark next to it and write a commentary about it below.

- I am disappointed in sobriety. (I was promised a rose garden.)
- I'm a bad person. (I should do the world a favor and drink myself to death.)
- I'm just an alcoholic. (So I should relapse, since that's what just-alcoholics do.)
- I'm doing so well in my sobriety. (So I should have one to celebrate.)
- I'm out of town, who'll ever know? (I will, but I am not an important person in my life.)
- I'm losing my mind. (Maybe drinking/using will restore me to sanity.)
- My addiction is to heroin, not alcohol, so I can safely have a drink now and then. (Once I drink I'll forget all about the trouble heroin got me into.)
- My sobriety is ironclad. (I don't have to work my program any more)
- By drinking, I'll really get even. (At my funeral they'll be sorry they were mean to me -- if anybody shows up.)
- Certain people want me to relapse. (And I'm only too glad to oblige them.)
- Drinking/drugging is the only real pleasure I ever knew. (I'll forget about all the pain and misery it brought me.)
- God is in charge of my recovery. (If I relapse it is God's will.)
- I am cured of my addiction. (I can now drink or use like non-addicts.)
- I can show these idiots how to stay sober. (My own program is perfect, I don't need to work on it any more.)
- I can stop anytime I want. (I just don't want to, right now.)
- I can't handle my shame and guilt. (So I'll add to my shame and guilt by relapsing.)
- I can't handle the emotional pain. (So I'll make it worse.)
- I guess I just haven't hit bottom yet. (Let me pull something even worse, that'll help.)
- I have a progressive fatal disease. (It's going to get me eventually, even if I stay sober, so why fight it?)
- I have relapse dreams, so why not go there for real. (I have to act out everything that happens in my dreams.)
- If people see me not drinking they'll guess I'm on the wagon because I'm an alcoholic. (So I better drink and leave no doubt in their minds.)
- I'll never be able to undo all the harm I've done to other people. (So I might as well drink myself to death.)
- I'm insane. (You can't expect a crazy person to get sober.)
- I'm just a defective person. (I'll never get it together for recovery, why try?)
- I'm making no progress, it's hopeless. (I might as well give up.)
- I'm more enlightened than the average person in recovery. (I can have the occasional drink or drug without risk.)
- I'm not an alcoholic. (So I can have just one or two drinks, like social drinkers.)
- I'm not really myself unless I'm high. (My sober self doesn't live up to my drunk self's high standards.)

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- \_\_\_ I'm only staying sober to impress X. (I myself am not important enough to stay sober for.)
- \_\_\_ I'm powerless against addiction. (I might as well stop trying to fight it.)
- \_\_\_ I'm sick of hanging around with all these drunks and addicts. (I'm not one, I can drink or use just a little bit and stop when I want.)
- \_\_\_ I've made up my mind I'll never drink again; case closed. (So why bother working any kind of recovery program?)
- \_\_\_ If I stay sober I'll lose all my friends. (Such wonderful friends, they only spend time with me when I'm drunk/high.)
- \_\_\_ If it's a choice between going to this meeting or drinking, I'll drink. (I'll forget about trying other meetings or trying to create the kind of meeting that will help me.)
- \_\_\_ It's all hopeless. (Might as well check out.)
- \_\_\_ My body is falling apart. (Alcohol/drugs will really improve my health, yeah.)
- \_\_\_ My character defects are so great I can't ever recover. (Drinking/using will really improve my character.)
- \_\_\_ My disease is alcoholism, so I can safely use marijuana. (Once I use marijuana, I'll forget what my disease was.)
- \_\_\_ My life is unmanageable. (Drinking/using will really help me get on top of it, yeah.)
- \_\_\_ Nobody cares whether I relapse or not. (I'm nobody.)
- \_\_\_ Nobody will know whether I relapsed. (I'm nobody.)
- \_\_\_ Only God can keep me sober. (Until I hear from Him personally, I'll drink.)
- \_\_\_ The person who wants me to stay sober is an asshole. (So I'll prove that I'm an even bigger one by relapsing.)
- \_\_\_ The world is against me. (Might as well head for the exit, it's hopeless.)
- \_\_\_ There's nothing the matter with me. (So why do I need a recovery program?)
- \_\_\_ Trying to change myself or my life is pointless, so f\*ck it. (I'd rather screw myself over with drugs and alcohol.)
- \_\_\_ (Other:) \_\_\_\_\_

Are there items on the list that you recognize as current occupants gnawing away in your mind? If so, write a commentary here that examines each one and puts it to rest.

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## 7 Relapse Smoke Alarms

The purpose of smoke alarms is to alert you to a fire that you can't see yet. Many decisions in life start in the unconscious part of the mind and only rise into awareness later. For example, the decision to change jobs may start out as a problem with getting up in the morning, a feeling of depression, a series of accidents or near-accidents on the job, irritability with co-workers, etc. Only later does the person become consciously aware that this job was not a good fit, and make a conscious plan to change it.

In a similar way, some people run into problems with their recovery without at first being consciously aware of it. Their unconscious mind labors on some recovery issue that absorbs part of their energy and affects their mood and maybe even their muscular coordination. On the surface they remain unaware that anything particular is wrong.

Here is a checklist of signals that may indicate a recovery problem smoldering beneath the surface of your consciousness. Knowing how to read the warning signs from your own unconscious can be a useful relapse prevention skill.

- I feel like I have a secret but I don't know what it is
- I get quiet around my sober friends for no particular reason I can express
- I'm looking forward to something special but I can't articulate what it is
- I feel mentally like I'm pregnant but I'm not
- I'm so preoccupied that I stumble over my words
- I'm so busy processing something that I take out the wrong key, or go to the wrong door, or make other goofs for no obvious reason
- I'm preoccupied to the point where I trip over my feet
- I get nervous or twitch a lot even though there's no obvious source of current stress
- I get hung up on compulsive activity like mindlessly playing Solitaire for hours on end
- I go to meetings but I pass instead of checking in, or I check in very superficially
- I think of reasons not to go to my usual meetings at all, or just don't go, without a good reason I can think of
- I'm late to recovery meetings or appointments without a real excuse
- When I get to some obvious trigger situation, I don't quickly avoid it or block it
- When I see liquor or drug stuff, I let my eyes linger on it and don't immediately shut down my thinking about it
- I ignore parts of my usual recovery program for no good reason, or I ignore all of it
- I get gloomy or elated in an unusual way for no visible reason
- I have weird drinking/using dreams night after night
- I feel that my life is going to change soon but I can't say how or why
- I feel as if I were going on a trip soon, but I have no real-life travel plans
- I have the sense that I'm going to die or get sick soon, for no obvious reason
- I get physical symptoms of stress (e.g. indigestion, insomnia, breathing problems, rashes, etc.) without any manifest reason
- I get irritable, harsh, unfair, or aggressive for no reason I can explain
- I suddenly feel like a doormat and let people walk all over me, when I don't have to
- I feel like I'm going to get revenge on people soon, but can't say exactly how or for what
- I cut people out of my life and isolate myself without being able to say truthfully why
- I look for and accept opportunities to get into risky situations for my sobriety

- I let my mind dwell on drinking or using without thinking it through to the harmful consequences
- I make plans to look up old drinking/drugging buddies, when I don't really have to, without making firm plans for how to stay sober once I get together with them
- I go back into places where I used to drink/use when I don't have to, and without making a firm plan for how to stay clean and sober there
- I somehow end up with liquor or drugs in my house or car and I don't energetically get rid of them
- I suddenly remember some stash of liquor or drugs I had squirreled away a long time ago, and when I find it I don't throw it out
- I suddenly feel relieved as if a load was off my mind, but I can't say why or what
- I feel as if some doom is impending, but I can't say why or what
- (Other:)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## 8 A Quick Relapse Check-Up

The trouble with a checklist such as the one in the previous section is that the symptoms can be due to other causes. For example, you could unconsciously feel a sense of doom because of the stock market or global warming; many clean and sober people do. Smoke detectors may go off from frying chicken. There may be no cause for concern if you find that some of these items apply to you.

Still – if you have checked several of the items on the list, wouldn't it be wise to give yourself a quick relapse check-up? Action may be especially urgent if your checked items include increased exposure to alcohol/drugs. Assuming that you have done some work in the previous chapters of this workbook, you could do a review here, for example:

- Have I made progress in addressing my "Body" issues, or am I letting some problem in that area fester and grow? (Chapter 2)
- Have I really done the best I can to minimize my exposure and to adopt a Daily Do exercise? Or am I being careless or reckless about getting into trigger situations, and am I neglecting my everyday reminders? (Chapter 3)
- Have I made progress in learning to do my life's activities clean and sober and in starting up new activities that interest me? Or am I barely functional and doing very little different from when I was drinking/using? (Chapter 4)
- Have I worked out who are the friends and who are the opponents of my recovery, and am I making progress in improving my people relationships? Or am I spending too much time with people who are a drag on my recovery, and not enough with people who care for me as a sober person? (Chapter 5)

- Have I succeeded in building more clean and sober pleasure into my life? Have I identified and learned to deal with my trigger feelings, if any, and do I feel better about my emotional life? Or am I treating recovery as a punishment and retreating into numbness? (Chapter 6)
- Have I pinpointed my major lifestyle issues and have I made progress in repairing any damage that addiction did to my lifestyle? Or have I resigned myself to the way things were and given up trying to solve my real-life problems? (Chapter 7)
- Have I reviewed my history and come to an understanding of what part of my life was me and what part was my addiction? Do I have a clearer sense of who I am, where I came from and where I am going? (Chapter 8)
- Have I identified the sources of support and the problem areas for my recovery in my culture, and have I begun to figure out my role in it? Or am I just another depressed, isolated couch potato soaking up beer commercials? (Chapter 9)
- Have I made the necessary decisions about treatment and support groups, and do I know how to go about getting what I need from these resources? (Chapter 10)
- Above all, have I understood that my recovery is my decision and my responsibility? (Chapter 1).

As you do this workbook review, listen to your feelings and to your body. Consult with a savvy friend if you have one. Do you find some stressful blank spots, emotionally painful areas, clenched-jaw issues, foot-tapping chapters, gut-wrenching sections, or other stuck points? If so, might your unconscious mind be preoccupied with, overwhelmed by, and unable to resolve some of these problem areas? Is your unconscious emotional processing engine overheating? Is that what the “smoke alarm” is trying to tell you?

If you consistently get a number of “hits” on the “Smoke Alarm” checklist (Page 253), one appropriate response might be to go back and work on one or more of the problem areas you identified in your relapse check-up, above.

⇒ **Action may be particularly urgent (red alert!) if you are getting into new situations where you have drugs/alcohol within reach.**

If you bring the resources of your conscious mind to bear on these issues – along with your other resources, such as professional help and group support, if you have them and want them -- you may be able to make progress on the problems, get your unconscious unstuck, and move on toward a stronger, freer recovery. You'll also feel better.

If you ignore your unconscious preoccupations, they may go away – or they may erupt to the surface of your consciousness weeks, months or even years later as a “made” decision to abandon recovery and return to drinking/using. Frying chicken left unattended can catch fire and burn the house down.

Some people relapse because a crisis catches them unprepared and overwhelms them. But in many instances, they steered into the crisis situation from far away with their eyes wide open. They will claim that circumstances overwhelmed them, but they persistently

ignored the warning signs and deliberately put themselves at risk. How does this approach to relapse differ from the person who frankly decides to relapse?

## 9 Recognizing Relapse Styles

The blade of relapse, like a hatchet, has a blunt and a sharp side. The "Type A" relapse is a blunt, square, hammer-like return to drinking/using -- a bender. The person usually plans this relapse ahead of time. Sometimes they will hole up somewhere, put everything else aside, and concentrate on drinking/drugging as much as possible as fast as possible until money or consciousness end, whichever comes first. This style of relapse resembles suicide. There's more about it in Section 10, below.

By contrast, the "Type B" relapse begins as a single drink or dose, "just one," followed by a pregnant pause that may last hours, days, or longer. It may seem that this was merely a slip, an isolated accident. But it soon turns out that the initial drink/dose was merely the thin end of the wedge, and more is to follow. By a set of slippery rationalizations, the one drink/use leads (after some time) to another, and then after a shorter time to a third, and after a still shorter time to more and more, until the person has pulled out all the stops and returned to their former level of drinking/using, or worse. This style of relapse resembles seduction. It may take weeks, months, or years for it to reach full development. It leads to the same place as the Type A, but it comes on differently and takes longer to get there. There's more about this type in Section 12, Page 261.

Have you seen or experienced either of these types of relapse? Have you experienced a different type, or a hybrid variety? What can you learn about relapse from knowing about the different approaches that people take to get there?

## 10 [My Relapse Plan]

People who consciously plan their relapses get points for honesty, but usually not for preparedness. They rarely think beyond laying in an adequate supply. The next worksheet presents an outline of typical issues that arise further down the relapse road. If you're planning a relapse, you can use this worksheet to plan it all the way through – and perhaps change your mind in the process.

Worksheet 11-1: [My Relapse Plan]

[MY RELAPSE PLAN]	
Substance I plan to use first	
Source where I plan to get the substance	
What I will say if I am seen getting the substance	
Place where I will hide the substance until ready to use	
Amount of money I plan to devote to the first drink/hit	
Source of the first money	
Place where I plan to take the first drink/hit	
Date I plan to do the first drink/hit	
Time of day I plan to do the first drink/hit	
Why I haven't done this relapse earlier	
Why I can't wait and do this relapse later	
Who if anyone will be with me when I do the first one	
Story I am going to tell others to explain what I am doing	
How I will keep the first one secret from people who care	
Story I am telling myself to convince myself this is not a relapse	<input type="checkbox"/> I'm cured of my addiction now, I can handle drinking/using <input type="checkbox"/> I never was an addict, I can drink/use normally <input type="checkbox"/> I deserve a little reward, I can have just one <input type="checkbox"/> This is just a little slip <input type="checkbox"/> This is just an experiment to see if I can handle it now <input type="checkbox"/> I just need one more blow-out before I commit to recovery <input type="checkbox"/> Other:
Other substances I plan to use after I get started	
Total budget for this relapse	___ Drugs/alcohol \$ _____ ___ Transportation \$ _____ ___ Shelter \$ _____ ___ Food \$ _____ ___ Medical care \$ _____ ___ Other \$ _____ Total \$ _____
Source of the money for the whole relapse budget	
Will the rent or mortgage be paid during my relapse?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No

1 Decision  
2 Body  
3 Exposure  
4 Activities  
5 People  
6 Feelings  
7 Life Style  
8 History  
9 Culture  
10 Treatment  
11 Relapse  
12 Day Plan  
13 Week Plan  
14 Life Plan

[MY RELAPSE PLAN]	
Will the utility bills be paid during my relapse?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Will I be able to meet my other obligations during my relapse?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Will I miss any appointments, birthdays, anniversaries; sales, concerts, get-togethers or other events because of this relapse?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Will I have a job or business when the relapse is over?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Will I have a roof over my head when the relapse is over?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Will this relapse cause the end of a relationship I'm in?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
How will my family members react to this relapse?	
Am I – could I be – pregnant?	
Having spent time in recovery, will I be able to really enjoy my drinking/using without feeling stupid and guilty?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
How will I get transportation during this relapse?	
If I drive a car during this relapse, can I afford a DUI?	<input type="checkbox"/> No
Number I will call if I need medical care as result of relapse	
Person who will put up bail for me in case I need it	
How will I get food during this relapse, if I want any?	
Will my relapse substances interact with any medications I'm taking?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Person who will come looking for me in case something happens to me during relapse	
Am I carrying identification?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will I have clean clothes and underwear during and at the end of this relapse?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Will I shower, shave and take care of my personal hygiene during this relapse?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Do I plan to end my life with this relapse?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
In case of a medical emergency, have I left legally binding instructions whether to resuscitate me?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No



[MY RELAPSE PLAN]	
Will I be having sex with strangers, or will strangers be having sex with me, during this relapse?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
In case sex happens, do I have condoms and will I have control to make sure they are used?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Have I signed organ donor papers so my usable body parts can help someone else, just in case?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Are there children to consider?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure
If there is a dog, cat, birds, fish or plants to consider, will they be taken care of during this relapse?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Are any of my family members liable to die during my relapse?	
Are any of my friends liable to die during my relapse?	
In case I black out and kill somebody during this relapse, am I prepared to put up with the guilt?	<input type="checkbox"/> No
How will I keep my belongings from being ripped off during this relapse?	
Will newspapers pile up outside my door during this relapse?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Will I miss any important mail during this relapse?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Have I made a will and is it located where it can be found, in case?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
Will my health insurance cover another round of detox and treatment?	<input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No
How will I handle it if the phone rings during my relapse?	
How will I feel physically when I am done with this relapse?	
How will I detox after this relapse?	
How much fun will that detox be?	
Will I be able to hide the fact that I relapsed?	<input type="checkbox"/> No <input type="checkbox"/> Not sure <input type="checkbox"/> Yes
How will I rebuild the trust of the people close to me, if any?	
Will my next recovery be easier or harder than this one?	<input type="checkbox"/> Easier <input type="checkbox"/> Harder <input type="checkbox"/> I may not have another recovery left in me <input type="checkbox"/> Not sure
What will people in my recovery meetings say when they hear about my relapse?	

[MY RELAPSE PLAN]	
How will I explain my relapse to people?	
How will I feel about starting my recovery out from Day 1 again?	
What will my counselor(s) say when they hear about my relapse?	
Will I feel better or worse about myself for having done this relapse?	
What message will I have sent with this relapse?	
Will my friends respect me more after this relapse?	
Will people feel sorry for me that I relapsed?	
Will people love me more because of my relapse?	
Will this relapse make people be sorry for the way they treated me?	
If this relapse is a cry for help, will it be answered?	
What problem of mine will this relapse solve?	
How will the world be different as a consequence of this relapse?	
The point of this relapse is:	

## II [Hitting the Panic Button]

At the moment when a person who has been in recovery for some time takes the first drink/hit, two conflicting reactions tend to occur within the brain. There is a rush of intoxication that brings back the old euphoric feelings of addiction. Simultaneously there is a sensation of panic, like the moment before a collision, because ending recovery is a psychological, physical, and social disaster.

Have you ever had a drinking/using dream and woken up in a cold sweat, terrified that you have blown your sobriety? Then you've experienced a taste of relapse panic.

Which of these two opposite reactions – euphoria or panic -- predominates in a particular instance depends on the individual and on the situation. Many people ignore the panic or misinterpret it as a reason to drink/use more. But for some people, the moment of panic serves as a last-chance alarm that brings their inner sobriety powers to red alert and energizes them, in one last desperate effort, to fling away the bottle or the rig and flee the scene to safety. Even people who have studiously planned to go on a bender sometimes recoil in rational terror and save themselves when the substance first hits their bloodstream.

⇒ Instant reaction is the key to survival in relapse panic. You may have only a second or two before the effects of the drink or drug overpower your body's response-to-danger chemistry. This is not a time for reflection or argument; it's a

time for reflex response by the major muscles. Like a pilot hitting the eject button, you need to put significant physical distance between yourself and the drink/drug NOW, or it's too late.

As with any powerful emotional experience, this kind of incident calls for a supportive debriefing. Whatever your support systems may be, now is the time to use them. You've had a slip, but you've avoided a major catastrophe. You've escaped a possible death trap with only minor injuries. If you have a counselor, call. If you have a support group, insist on sharing and getting feedback. If you keep a journal, write in it. This could be a powerfully enlightening and energizing experience for your recovery, and an educational lesson for everyone fortunate enough to have shared it with you.

## 12 [Slippery Logic That Lubricates the Seduction-Style Relapse]

A person who quick-ejects from a bender-style relapse may still fall prey to the Type B variety – the gradual seduction that may take weeks, months or years.

⇒A hallmark of the slow-seduction type of relapse is persistent mental preoccupation with the next drink/drug. Having “broken the ice” with the first one, the person spends hours, days, weeks, months or (rarely) years thinking and thinking and thinking about the next one. In some people, this becomes an obsession that crowds out all other mental activity.

Much of the reasoning that people do in the pregnant pause between their first one and their next one seems twisted and laughable to the sober mind. The checklist that follows gives a fair sample. But anyone who has been there will tell you that this lame parade of rationalizations seemed brilliant at the time.

If you have experience with this kind of relapse, put a checkmark next to all the arguments that you have used on yourself; be sure to enter and share any new ones of your own addicted brain's invention.

Even if you've never experienced this kind of relapse, it may be worth doing the exercise for prophylactic reasons. If you can prepare your mind to recognize and break down this kind of reasoning ahead of time, you may have a better chance of derailing a Type B relapse if you ever fall into one. Seduction doesn't always have to succeed; if you can see the con, you may be able to break it.

- Since I handled the first one without any problem, I can obviously handle another one
- Since I stopped after the first one, I can have any number and stop whenever I want
- Since I was able to stop after the first one, I obviously never was addicted, so I can have another one
- Since I was able to stop after the first one, I obviously am cured of my addiction now, so I can have another one
- Since I was able to stop after the first one, I am obviously recovered now, so I can have another one

- I'm not really relapsing, I'm practicing moderation management, so I can have another
  - I'm not really relapsing, I'm practicing controlled drinking/using, so I can have another
  - I'm not really relapsing, I'm drinking/using normally again, so I can have another
  - I'm not really relapsing, I'm doing drink counting, and I can have another
  - I'm not really relapsing, I'm experimenting with my tolerance, and so I can have another
  - It's not a relapse because I have nothing to relapse from, so I can have another
  - This isn't the drug I'm addicted to, so I can have another of these
  - I'm not really relapsing, I just had a slip, and it would still be just a slip if I have another
  - That first one was just for a special occasion; fortunately, there's another occasion coming up that's just as special
  - That first one was just because I had a really difficult moment; and I feel another difficult moment coming on
  - Why "must" I not drink/use? I will stop making myself miserable with "musts" and follow my preferences and have another
  - It's true that every time I've tried to limit my drinking/using in the past ten years it hasn't worked, but the manly thing is to keep trying, so I should have another
  - As long as I drink/use for the purpose of enjoyment and not for the purpose of evading my psychological problems, it's OK to have more, so I can have another
  - As long as I drink slowly instead of gulping, it's OK to have more, so I can have another
  - It's OK to have another one as long as I don't get drunk, and I didn't, so I can have another
  - As long as I only drink/use to be sociable, not to try to solve my problems, it's OK to have more, so I can have another
  - That first one was just to celebrate my recovery and it's worth celebrating again, so I can have another
  - That first one was to give me a different perspective on my recovery, and that was interesting and worth doing again soon
  - That first one was just a break to give me the strength to go on with my recovery; I'm feeling like I need another break soon
  - I still have some left after the first one; if I keep it around I might get triggered to drink/use later, so I better do it now
  - If I were to avoid having another it would seem as if I thought I had a problem, so I should have another to prove that I don't
  - If I were to agonize over having another one it would tend to suggest that I have a problem, so I'll have another one without thinking about it
  - Since I blew my recovery anyway, I might as well go all the way and have another one or two or twelve
  - Having had this one makes me feel so guilty and ashamed that I can't handle it and I need to have another one to make me feel better
  - (Other)
-

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### 13 [Getting Back to Solid Ground]

All of the slippery arguments in the previous worksheet end up with the express or implied conclusion that "I can have another." Can you take each of these arguments and come to the opposite conclusion? For example:

- Slippery argument: "Since I handled the first one without any problem, I can obviously handle another one."
- Same argument turned around: "I handled the first one without a problem, but I think I'll stop right there and not push my luck. I'm not going to play Russian roulette."
- Slippery argument: "I'm not really relapsing, I'm drinking/using normally again, so I can have another"
- Same argument turned around: "Maybe I'm not really relapsing and maybe I'm drinking/using normally again, but if that's the case I'll do what any normal person would do and never touch the sh\*t again, considering the grief it's caused me."
- Slippery argument: "Having had this one makes me feel so guilty and ashamed that I can't handle it and I need to have another one to make me feel better"
- Same argument turned around: "Having had this one makes me feel guilty and ashamed, and if I have another one I'll feel even more guilty and ashamed, so the thing to do is cut my losses and stop now and get back into recovery."

Using these examples, for each argument on the slippery logic checklist that has run through your mind, write a counter-argument that starts from the same premise but comes to the conclusion that it's better to stop:

Slippery argument No. 1:

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Same argument turned around to reach the opposite conclusion:

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Slippery argument No. 2:

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Same argument turned around to reach the opposite conclusion:

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(Use a separate sheet for more).

## 14 [Debriefing And Re-Entry After Relapse]

One way or another, many people manage to terminate their relapses before the relapse terminates them. Recovery from relapse is, fortunately, a common experience. When you are clean and sober again, it may be useful to figure out what happened to bring about the relapse and to take preventive measures against a repeat. Because remembering a relapse can be emotionally stressful, it may be especially helpful to debrief with supportive friends. Even if you are stable now, it is a service to others to share your relapse experience so that others can have the opportunity to learn by hearing rather than by doing.

If you have a support group and are ready to give your debriefing, is your group ready to receive it? Few people will readily explore their relapses with a group that is judgmental, opinionated, and likely to overwhelm the person with unsolicited advice. If you relapsed you probably already feel bad enough without having other people dump on you. Sometimes people leave their support group permanently after a relapse because of the group's judgmental attitude. Do you think this kind of attitude advances the group?

⇒ It may be helpful to think of your recovery as a project that has never been done before. This is strictly true. Other people have made their recoveries, but they aren't you. There are no ready-made blueprints for the recovery of YOU. You can and should learn from other people's experiences, but the bottom line is that you have to design and build and maintain your recovery yourself. In any such project, mistakes are inevitable.

In the real world, no computer program, no blueprint, no recipe, no business plan, no serious project of any kind goes from first draft through completion without errors and omissions. (Look at Microsoft Windows.) Making mistakes and learning from them is the nature of progress. A support group that is serious about members helping one another recover will understand this.

Assuming that you have a group that is open-minded, empathetic, and pragmatic in its attitude, how should you present your post-relapse debriefing? Have you really done the job if you toss out a one-liner, such as "I guess I got complacent" or "I got into a slippery situation and I slipped," and the like?

The next section of this chapter contains a debriefing outline that covers more territory and goes into more depth. Even if you don't present the whole thing to the group, working the outline may be helpful to your own understanding.

## ***15 [My Post-Relapse Debriefing Outline]***

You will note that the Relapse Debriefing outline (Page 266) approximately follows the system that a physician might use in assessing a patient, beginning with a history and ending with a plan of action. In analyzing your relapse you are, in effect, becoming your own therapist and counselor.

You are in a position to know yourself better than any one else, if you work at it; you are always there when you need yourself; and your fees are reasonable. The more skillful and confident you become at being your own therapist, the better are your chances to survive any challenge to your recovery.

## Worksheet 11-2: Post-Relapse Debriefing

<b>REPORT ON MY RECENT RELAPSE -- AN OUTLINE</b>	
<b>Date I put the first drink/dose of this relapse into my body</b>	
<b>Circumstances of first input</b>	
<b>I. Pre-Input</b>	
<b>My continuous clean and sober time prior to putting first drink/dose into my body this time:</b>	
<b>Date that I made the conscious decision to drink/use this time:</b>	
<b>“Termites” at work in my mind prior to making decision to drink/use: (See Page 251)</b>	
<b>Warning signs of possible relapse before the day I made the decision to drink/use: (Refer to “Smoke Alarms” checklist, Page 253)</b>	
<b>Action I took to respond to warning signs of possible relapse:</b>	
<b>Pre-relapse status of my concerns about my physical and mental health: (Chapter 2)</b>	



REPORT ON MY RECENT RELAPSE -- AN OUTLINE	
<p>Pre-relapse status of my efforts to minimize my exposure to alcohol/ drugs, to create safe space and time, and to do Daily Do exercises: (Chapter 3)</p>	
<p>Pre-relapse status of my progress in learning to do activities sober and to acquire sober new activities that interest me: (Chapter 4)</p>	
<p>Pre-relapse status of my work to maximize my recovery support from people and to minimize contact with people who oppose my recovery: (Chapter 5)</p>	
<p>Pre-relapse status of my efforts to bring more pleasure into my recovery, to recognize and handle my trigger feelings, and to develop a more satisfying emotional life: (Chapter 6)</p>	
<p>Pre-relapse status of my work to repair the impact of drinking/using on my life style and improve my real-world situation: (Chapter 7)</p>	
<p>Pre-relapse status of my efforts to get oriented in my culture in a clean and sober manner: (Chapter 8)</p>	

1 Decision  
 2 Body  
 3 Exposure  
 4 Activities  
 5 People  
 6 Feelings  
 7 Life Style  
 8 History  
 9 Culture  
 10 Treatment  
**11 Relapse**  
 12 Day Plan  
 13 Week Plan  
 14 Life Plan

<b>REPORT ON MY RECENT RELAPSE -- AN OUTLINE</b>	
<b>Pre-Relapse status of my work to understand my personal history, to separate what was me from what was my addiction: (Chapter 9)</b>	
<b>Pre-Relapse status of my involvement with treatment and with support groups: (Chapter 10)</b>	
<b>Pre-Relapse status of any other concerns of relevance:</b>	
<b>Summary of major unresolved problem areas in my recovery, pre-relapse:</b>	
<b>II. Post-Input Relapse Course</b>	
<b>Interval between first drink/use and last drink/use of this relapse:</b>	
<b>Type of relapse onset (sudden, gradual, or other):</b>	
<b>Substances used, sequence, amounts:</b>	
<b>Immediate consequences of this relapse:</b>	

<b>REPORT ON MY RECENT RELAPSE -- AN OUTLINE</b>	
<b>How I pulled out of this relapse:</b>	
<b>III. Plan to Prevent Recurrence</b>	
<b>Probable main underlying cause of this relapse:</b>	
<b>Main recovery area to work on:</b>	
<b>Specific changes to make:</b>	
<b>Comments:</b>	

## 16 [Down Is Not the Way to Up]

People who rejected every life preserver and are sinking back into their old pattern of intoxication still need not and should not give up on recovery. Relapse can be a complex, twisty process, just as recovery is, and opportunities to step off its downward course and return to a clean and sober life can arise at any moment. Seize them if you can.

⇒ It's important to know that worse is not better. Your chances of recovery do not improve as you sink lower and lower in life. Although some people do bounce back from the gutter, they are the rare exception. Studies show that your chances of recovery go down as you do. The more you lose – job, family, shelter, car, health – the more liable you are also to lose the battle for recovery and for life itself. Don't delude yourself that by sinking deeper and deeper into relapse, you're really coming closer to your turnaround point, so that your relapse is really a stealth recovery tool. That is lunacy.

People who relapse after having had a good taste of recovery often report that drinking/drugging isn't fun any more. The experience of having been clean and sober spoils the pleasures of addiction, and the whole alcohol/drug scene now reveals itself as infinitely cynical and depressing. The memory of recovery remains alive in you and now exercises its own seduction. Embrace it if you get the chance.

## 17 Summary: My Relapse Prevention Checklist

The best relapse prevention is to work on getting to know yourself and building and updating your personal recovery program. Unless you happen to be one of the lucky individuals who perfectly matches the parameters of one of the off-the-rack recovery programs, it does little good to adopt one as is. At the very least, you have to rework it and adapt it from start to finish until it becomes truly yours. Otherwise, it may sit inside you like an alien transplant and in time you will reject it.

Many decades of experience have gone into the finding that effective treatment is individualized (National Institute on Drug Abuse, see Introduction, Page 9). Institutionalized programs may at best come close to the ideal of individualized treatment, but the treatment you give yourself can match your needs perfectly.

Here is a checklist that may be useful in tuning up your personal recovery program and in modifying it as your feelings and your situation develop. You are not static; your recovery program needs to develop as you do. Perhaps, like a snake, you can shed your old one from time to time and grow a new one, very similar to the old one, but bigger, fresher, more supple and more comfortable.

Worksheet 11-3: Recovery Tune-Up and Relapse Prevention Checklist

MY RECOVERY TUNE-UP AND RELAPSE PREVENTION CHECKLIST	
___	I remember why I originally wanted to get clean and sober
___	I now see additional reasons to stay clean and sober, beyond what I saw to begin with
___	I understand and use the method of analyzing my choices in terms of the Sobriety Priority
___	I know what my issues are concerning my body and my mental health, and I am working on them
___	I minimize my exposure to alcohol/drugs to the degree necessary for my recovery
___	I know what my main trigger situations are and I have worked out a method to either avoid them or handle them clean and sober
___	I have safe places and safe times where I can go to recharge my recovery fuel cells
___	I start my day with a carefully thought-out personal affirmation and reminder ritual
___	I have learned to handle all my necessary activities in a clean and sober manner, and have learned to avoid for the time being those that I cannot yet manage
___	I have started clean and sober new activities that fill my time and engage my interest
___	I know who the people are who support my recovery and I am developing closer relationships with them
___	I am learning how to open up my new way of living to others and how to feel comfortable in my new identity as a person who does not drink or use
___	I am doing my honest best to work on improving my ongoing relationships in a way that is positive for my recovery
___	I am getting better at dealing with people who oppose my recovery and in learning to manage them or avoid them
___	I am paying attention to my feelings and learning to recognize and accept them
___	I am recapturing the pleasures that alcohol/drugs took over
___	I am doing something clean and sober every day to make me feel good
___	I know at least three ways of handling strong trigger feelings when they come up
___	I feel good about being clean and sober now
___	I recognize what my old emotional issues are and I have a plan for handling them
___	I know the impact of my past drinking/drugging on my work situation and I am working on it
___	I understand the impact of my past drinking/drugging on my housing situation and I am doing what can be done
___	I recognize the impact of my past drinking/drugging on my living situation, and I am making the appropriate moves
___	I see the impact of my past drinking/drugging on my social life, and I am putting effort into it
___	I can see the effects of my past drinking/drugging on my housekeeping and personal hygiene, and I am taking the appropriate steps
___	I understand the relationship between my past drinking/drugging and my sex life, and I am doing what I consider best for my recovery
___	I recognize the impact of my past drinking/drugging on my financial situation, and I am doing the best I can
___	I know the relationship between my drinking/drugging and my health insurance, and I am acting accordingly
___	I am doing what needs to be done regarding my legal situation
___	I am attending to any other life style issues that I feel would strengthen my recovery

1 Decision  
2 Body  
3 Exposure  
4 Activities  
5 People  
6 Feelings  
7 Life Style  
8 History  
9 Culture  
10 Treatment  
11 Relapse  
12 Day Plan  
13 Week Plan  
14 Life Plan

MY RECOVERY TUNE-UP AND RELAPSE PREVENTION CHECKLIST	
—	I understand that my sobriety is the foundation of all my life style improvements
—	I am learning to recognize and to distinguish the messages in the culture around me that promote addiction and those that are supportive of my recovery
—	I feel more oriented about the social, political and economic interests that have an influence on the setting in which my recovery is taking place
—	I am making progress at becoming a member of my communities in a way that affirms my recovery
—	I understand that becoming addicted can happen to anyone who drinks or uses and that I am not a bad person because it happened to me
—	I have a clearer picture of who I was before I got sidetracked by substance use, and I accept the original clean and sober me as valid and worthwhile
—	I have calculated and summed up the cost of my past substance use in terms of time and money, and made better plans for those resources in the future
—	I have separated out the parts of my past life that were due to my addiction, and have a clearer sense of my strengths and weaknesses as a clean and sober person
—	I have emotionally said good-bye to the person I was when I was drinking/using, and have finished grieving, and I have a clearer sense of purpose in my life as I move forward as a clean and sober person
—	I have explored the treatment resources available to me and I have made the maximum possible use of them for my recovery under the circumstances
—	I am an actively participating member of a community of people who are working on their own recoveries from substance addictions and who support me and look to me to support them
—	I have a better sense for what is going on inside of me and I monitor myself frequently for possible relapse early warning signs
—	I recognize the mental bugs that could undermine my recovery program and I know how to handle them when they show up
—	If despite my best efforts I should relapse, I have prepared myself to eject immediately and to defeat the seductive self-talk that would lead me deeper into the pit
—	I understand that staying clean and sober is my responsibility and that no one else will or can do it for me
—	I will not drink or use, no matter what