

Relapse Action Plan

No matter how hard you work a program of dual recovery, there's always a chance that you will return to substance use and/or have distressing experiences with your mental health. Having a plan of action thought out and written down ahead of time to help cope with these situations can be extremely beneficial. Below are several example forms that may help you identify resources and create your own action plans. It's good to be prepared for emergencies ahead of time.

Unexpected cravings happen to just about every person recovering from substance use. They can be brought up by something seen on TV or in a magazine, a smell or sound that you might associate with drinking or using, a particular feeling or mood, and sometimes they just seem to come out of nowhere. Sometimes they can be so powerful that you almost feel the taste in your mouth or swear you smell marijuana. Nine times out of ten these sudden urges hit when we 'are' in a position to act on them. No one is around--no one is watching. It is very important to have a plan for these times. In the first months of recovery our most natural inclination will probably be to satisfy our craving; will power and good intentions are not always enough. We need to take an alternative course of action. To sit and wrestle with the cravings is an unbearable situation for a person in recovery. Instead, we have learned that immediately calling another recovering person is very helpful. Getting yourself to a meeting or recovery club can be a lifesaver. Other times, going for a walk or vigorous exercise does the trick. We can reach out to our supports for assistance and strength. Over time these cravings diminish in intensity, however, people who have achieved long-term abstinence have learned to always take them seriously.

Action plan for when cravings arise		
Five people I can call the minute I get a craving or urge to drink:		
1. 2.		
3		
4		
5		
Five things I can do to get my mind off of using or drinking:		
1		
2		
3		
4		
5		

Though lapses in our abstinence aren't desired, all need not be lost if and when they occur. While it's painful, we can learn from our experiences in hopes to not repeat them. It is best to get right back into recovery and regain our abstinence as soon as possible.-If we are prepared for the possibility of a lapse ahead of time, it is more likely that we can keep it from becoming a full-blown relapse.

Action plan if I relapse		
These are some warning signs and relapse factors to watch out for:		
1		
2. 3.		
4		
5		
If I should relapse, I need to tell these people:		
1		
2		
3		
4		
5		

I need to do these things to make sure it doesn't happen again:		
1		
2		
3		
4		
5		

At times, distressing experiences with our mental health can impact our ability to make sound choices for recovery. This can happen despite our best efforts and all the progress we've made in dual recovery. Sometimes our job is just to weather the storm in the most constructive way we can, keeping in mind that these are no-fault illnesses. Some members have found that having a plan of action in place before challenges arise can be a great comfort and a powerful recovery tool. They discuss a plan of action ahead of time with professional helpers, their sponsor, family, and friends. Such a plan may make the difference between a manageable challenge and a challenge that disrupts life.

If my mental health becomes too difficult to cope with		
These are some preceding warning signs:		
1		
2		
3		
4		
5		
If I should experience this, I need to tell these people:		
1		
2		
3		
4		
5		

I need to do these things to cope:	
1	
2	
3	
4	
5	
If I have a psychiatric emergency:	
I would like to see Dr	
I authorize	_ to take care of
and	