**Equipping Teen Challenge Ministries**

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**Memo**

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To: Teachers

From: Dave Batty

RE: Teaching notes for Understanding Steps to Relapse 2.1

Here are some of the key issues that go with the teaching of this course.

1. Personal Application Ideas page at front of manual. I tell them to write their own ideas here on how they can begin to use this material in their own ministry. Whether big or small, these are their own ideas on practical steps where they can start in applying this when they return home.
2. This course needs at least 5 hours to teach it and give adequate attention to the main issues covered. If you have less time, I would suggest you simply tell them which chapters you are going to cover and then teach them well rather than trying to rush through the whole course in less time.

Generally speaking, each chapter is designed to be covered in one hour. However, most of the chapters could be covered in much greater detail, and thus more time than one hour.

1. There are some notes in the PPTs that are not included in the manual.
2. Chapter 1—introduction to relapse is pretty straightforward. The four major issues we will cover are introduced on page 3 & 4. They are only mentioned here to give them the 50,000 foot view of what we will cover in this course.
3. The dry relapse and wet relapse concepts come from treating alcohol addiction.
4. The seven reasons why recovery quickly turns into relapse is an attempt to get them to immediately see some of the common reasons why people relapse. My purpose here is to do more than simply lay a theoretical foundation in chapter 1, but to get into some issues of substance.
5. Chapter 2 – Relapse. I have this chapter as our first in-depth chapter even though it is in the middle of the 4 major steps. First, let’s understand relapse, then we will go back to look at how they got involved in addiction, and what were their original steps of recovery, and why did they not work?
6. Page 7—The Faster Relapse Awareness Scale is one approach to explaining relapse. I present this to show a 5 step process of dry relapse. Some of the terms used in this description are very helpful in seeing what is going on in the mind and behavior of the relapsing person. I do not spend a huge amount of time of this, but enough so they can see this as one way of understanding the relapse process.
7. Page 8—A closer look at relapse. This is another way of looking at relapse, and one that I like. First, the 37 symptoms of relapse will seem a little overwhelming to the person seeing this for the first time, so in the class, I do not go over every single one of these symptoms. I cover the symptoms first, and then come back and talk about the Recovery Strategies.

I go over the symptoms one by one for at least the first 6-10 symptoms so they can see the early steps to relapse. I spend a good amount of time on step one, because this issue of self-image is the first crumbling block in their steps back into relapse.

I also explain that each of these steps are predictable, and common. When I was the director in New York, I listed all 37 symptoms on a single sheet and then give them to the person who had relapsed and had them go down the list and check off every one that they see in their own life. Generally, they would check off at least half of these symptoms. That provided me with at least 20 possible issues that need to be addressed in helping them get on the path to recovery. (This needs to be assessed by the TC staff in light of relapse symptom #2, denial, which may be causing them to not see the other relapse steps in their life. However, I have never had anyone who relapsed and said they had none of these symptoms.)

These 37 steps to relapse are not absolute. They are based on the common experiences of many who have relapsed. So a person may not have experienced some of these, and they also may have other relapse symptoms not listed here.

As you go through this list of 37 relapse steps, there is a progression of moving toward more serious problems.

After discussing the first 6-10 steps to relapse, I then go and cover the last 6-8 steps, so they can see what the last steps look like. Point out that many people look at symptom #37 and say, “That person relapsed.” But what they are observing is not the first step of relapse, but step 37. All 37 steps are describing a person on the path of relapse, not just the last step.

1. After covering the Relapse Symptoms, I come back to Symptom #1 and then discuss “Recovery Strategies” for that particular symptom. I have only put a very few suggestions for recovery strategies for each relapse symptom.

What I am wanting them to see here is that there is a need for specific recovery steps that are directly related to the relapse symptom. Call it targeted recovery. Some ask if a TC student needs to go all the way through the whole program again if they relapse. My answer is generally no, but it all depends on individual circumstances.

But a more targeted approach to recovery is likely to produce better results. The recovery strategies need to start with scriptures that provide a foundation for God’s truth to speak to this issue. The recovery strategies need to not only address the problems in the relapse symptom, but also address the positive steps needed to truly move towards recovery.

The dilemma here is that you can easily get into teaching chapters 4, 5 & 6 here. So I would give several specific examples of recovery steps, and then tell them we will cover this is more detail in these later chapters.

It is very important to point out that the recovery strategies will not be the same for each person. In fact, they might be very different for two people dealing with the same symptom. What works for you might not work for me at all. So this is where each step needs to be personalized for what works for me.

Another way of looking at these 37 steps is that this could be the foundation for a much more detailed course on relapse, where we take a much closer look at each of these steps.

1. Chapter 3—the path to addiction. This chapter can be covered quickly or in more detail depending on what other classes on addiction they are having in this week of training. Many of these concepts come from the Living Free training.
2. Page 14—Jeff Van Vonderan’s definition of addiction. The issue of “meeting life’s needs” is the key to this definition. I then illustrate that any other addiction put into this statement has the same results.
3. Chapter 4—Recovery. This chapter could easily be expanded to more than one hour. On the bottom of page 18, it lists the 4 phases of recovery. We list them here, and then cover each one in more detail in this chapter.

Step one, intervention, and step 2, detox, I cover rather quickly, depending on what we have already covered in other workshops. However, if they have not had any teaching on intervention, then it would be appropriate to cover that in enough detail that they know how to do this.

Phase 3—Learning steps to healthy living, is the big part of recovery. In essence, this describes the whole TC residential program.

Most of the material in chapter 3 is pretty straightforward. If you have questions on any of it, just let me know.

1. On the bottom of page 20 is Point D “Teen Challenge uses the Christian Discipleship treatment model.” This section is introduced with a PPT slide #57 which has the following illustration.



This is used to illustrate the whole process of addiction, recovery, relapse, and recovery.

The top blue line represents living the life God intended for us, reaching the full potential for life.

The lower dark blue line on the left side represents the person we are using for this illustration. That line represents where they are living their life—far below God’s potential for them.

The RED line represents the destructive path of addiction, bringing more pain and loss into their lives.

The Green line represents the path to recovery. It is important that the path to recovery goes forward, not backward. We can’t go back in time and change things. This green path is what we are working on at TC, with all the activities included in our program.

On this illustration, we show what happens to a person who does not experience the full recovery God has for them. They only go part way up that path, and then leave TC, saying they are fine. Another way of looking at this is that they may only experience part of God’s recovery for them even if they graduate.

The Dark blue line coming off the green line, represents what happens in their life when they stop working their recovery. They end up living a life at less than God desires for them. And soon, or 6 yrs from now, they relapse. The RED arrow (bottom Right) shows them on the path of relapse—heading down a destructive path.

The second green line on the right illustrates someone experiencing full recovery to achieve the full potential in life that God has for them.

It is important to point out that we never reach perfection, but we can reach a place of maturity, balance and stability in our life, and walk with God. We will talk more about healthy living in Chapters 5 & 6.

The other point to make here is that at any point in our life, we can choose to start making wrong decisions that can take us down a path of relapse. We do not need to live in fear of that, but we must be ever diligent to focus on our daily spiritual health, and every other kind of health in our lives.

1. Point out that relapse cannot occur unless a person has experienced real recovery. If a person leaves the TC program one day, or one week after entering the program, they did not relapse, because they never experienced recovery. They simply continued in their state of addiction and mastery by life-controlling problems.
2. Page 24 has a place to list what’s in your toolbox for recovery? This is designed for them to identify specific strategies that will help them. This can easily tie back to the “Recovery Strategies” covered in chapter 2 related to the 37 relapse symptoms.
3. Two other issues deserve mention here, but are not covered in detail in the course materials. (1) Renewing their mind. (2) Developing problem solving strategies that honor God. Both of these are extremely important parts of our recovery, and continued healthy living. These are covered in other workshops.
4. Chapter 5—Healthy living. This is such an important part of staying on the path to living the life God has for me. I do not need to be in “recovery” for the rest of my life. However, I need to be attentive to living a “healthy” life every day for the rest of my life. When we talk about healthy living, we are not talking just about physical health. We are talking about the full scope of healthy living—physical, spiritual, relationships, personal growth, in all areas of my life.

One of the big problems in TC is that we have staff who are dysfunctional. They are not living a healthy life, as defined above, they are living at less than God desires. Stated another way, they are carrying a lot of baggage in their lives. As a result, dysfunctional staff are producing dysfunctional students—who are highly susceptible to relapse.

Another way of talking about this issue here is to focus on personal application of Biblical principles. Healthy living includes the key issue of consistently applying biblical principles in our daily living.

In this chapter we talk about 3 characteristics of the person who is on the path to maturity in their daily living. Each of these can be examined in detail depending on the time you have for this chapter.

1. Chapter 6—A second look at healthy living—steps to maturity. This chapter goes into greater detail looking at healthy living. This material comes from the book The Life Model, Living from the Heart Jesus Gave You. This is an excellent book, and we are only dealing with a small part of the book which describes the 5 stages of life.

This book is also available in Spanish, and can be ordered from their website, [www.lifemodel.org](http://www.lifemodel.org)

Page 28 has the infant stage. The Personal Tasks in the left column are the tasks that a person can master by age 3. In other words, this is what a mature person looks like at that age.

In our context, we are talking about adults. If they never mastered these basic life tasks in their childhood, they can start now.

Column 3 (right) shows what problems will surface in their life if they do not master the corresponding task in the left column. So both the left and right columns provide evaluation points for assessing the maturity of a person, and identifying areas where they need to grow.

The middle column describes what parents, and TC staff can do to help students master these steps.

With each of these personal tasks, there are scriptures and biblical principles that can be identified to help a person master each task.

1. The next page after each chart is a Personal Assessment page giving a variety to steps that can be used to move toward greater implementation of each personal task.
2. In teaching this chapter, you will not have time to go over all the material in this chapter in one hour. So I would go through the Infant stage in detail, and then also try to cover the next one—the Child stage. Give particular attention to Personal Task #2, “Learns what brings personal satisfaction.” Notice the problems in column on right when they fail to master this task—addictions.
3. The Appendix has some additional ideas on aftercare.