The Cycle of Addiction

The Sobriety Priority approach for achieving and maintaining freedom from alcohol and other mind-altering drugs is a cognitive strategy. It can be applied, on a daily basis, as long as one lives, to prevent relapse.

The Sobriety Priority approach respects the power of “nature” (genetic inheritance, physiological constitution) and of “nurture” (learned habit, behaviors, and associations) by showing how to achieve the initial arrest of cellular addiction and stave off the chronic habits that result from this addiction.

The “cycle of addiction” contains three debilitating elements: chemical need (at the physiological cellular level), learned habit (chronic drinking/using behavior and associations), and denial of both need and habit.

The cycle of alcohol addiction usually develops over a period of years. Cycles have been found to be much shorter with other drugs, especially cocaine. In all cases, however, the addiction becomes “Priority One,” a separate issue from everything else. And as it progresses, it begins to negate everything else.

The Cycle of Sobriety

The cycle of addiction can be successfully replaced by another cycle: the cycle of sobriety. This cycle contains three essential elements: acknowledgment of one’s addiction to alcohol or drugs (you may have euphemistically called it “a problem”); acceptance of one’s addiction; and prioritization of sobriety as the primary issue in one’s life.

The daily cognitive application of a new “Priority One,” the Sobriety Priority, as a separate issue, arrests the cycle of addiction. It frees the sober alcoholic/addict to experience “everything else,” by teaching him or her to associate “everything else” with sobriety, not with drinking or using behaviors. The cycle of sobriety remains in place only so long as the sober alcoholic/addict cognitively chooses to continue to acknowledge the existence of his or her arrested addiction(s).

The Sobriety Priority, applied daily, gradually weakens booze and drug associations, halting the cycle of addiction, allowing time for new associations to form as one experiences life without addictive chemicals. As one continues to “make peace” with the facts regarding his or her arrested addiction—that is, as one continues to recognize alcohol and drugs as a non-option—one comes to prefer a sober lifestyle; one longs to preserve it, to respect the arrested chemical addiction, and to protect the new, sober life.

Portions of this brochure are excerpted from Unhooked: Staying Sober and Drug-Free (Prometheus Books, 1989) by James Christopher, founder of SOS.

Copies of this and other SOS brochures may be obtained from the SOS Clearinghouse. This brochure was updated February 2002.

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THE SOBRIETY PRIORITY
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Traditional therapies, usually based on AA’s twelve-step model, connect sobriety to God. New Agers or proponents of what is called “transpersonal therapy” would connect it to some mystical “unity” or “cosmic holism.”

Even those who are more rational often say, “If you get good, you can get sober,” meaning that, if you make other positive changes in your life, sobriety will follow. Others will hedge: “Well, you have to learn coping strategies. You have to alter your life here, and take these certain steps to do such and such.

All these things may very well be valuable and important, and I am not advocating that people just get sober and sit in a chair. But I am saying that one should not lose sight of the priority, not goodness, not cosmic unity, not obedience to the will of a so-called higher power. It’s sobriety itself. Sobriety is a priority, but it’s not an obsession. It offers a kind of backdrop against the positive essence of this experience as a way of achieving and maintaining sobriety for life.

Several years later, when I got sober again, I had a more difficult time of it. To wit: screaming and shaking and sweating and thinking that I was dying. My alcoholism had deepened profoundly, and I had abandoned my nonchalant attitude as I was scared half to death. I have wanted to retain the positive essence of this experience as a way of maintaining a healthy respect for my arrested addiction when one is most vulnerable, reaching. We look at the world and our lives in order to achieve and maintain sobriety.

One comes to a program of recovery from addiction when one is most vulnerable, reaching out for help. This does not mean, however, that one must sacrifice intellectual integrity or compromise individuality in order to achieve and maintain a life of sobriety.

Studies of religions and cults have consistently proved that people tend to convert at times of great stress or failure in their lives. These are times when promises of enlightenment and cures for pain are most appealing. People don’t look for proof or evidence or even coherence in belief. They see someone throwing them a life preserver, and they grab it when you’ve lost faith in yourself, it’s only too easy to find it in something else.

Getting Help

One comes to a program of recovery from addiction when one is most vulnerable, reaching out for help. This does not mean, however, that one must sacrifice intellectual integrity or compromise individuality in order to achieve and maintain a life of sobriety.

A Personal Perspective

A number of years ago I stood by the hospital bed of a close friend who had just died at the age of forty-seven. He had been “only a heavy drinker,” diagnosed as “nonalcoholic.” Yet he died of alcohol-related deterioration. The doctors in attendance said that he had simply “fallen apart” physically. I’ve known persons of all ages who have tried time after time to find a way to handle their “problem drinking.” I can’t think of a single case where sobriety would have brought them harm. I had a seven-month interruption in my seventeen years of consuming alcohol. That period of sobriety ended with a bizarre “celebration”: I was “able to drink again.” To “prove” it, I downed a fifth of premixed vodka martinis. When I related this to my therapist at the time, she agreed “This, indeed, makes good sense.”

Several years later, when I got sober again, I had a more difficult time of it. To wit: screaming and shaking and sweating and thinking that I was dying. My alcoholism had deepened profoundly, and I had abandoned my nonchalant attitude as well as my agreeable therapist. By so doing I abandoned the alcoholic’s most persistent nemesis: denial.

Those seven months had merely been a “time out.” Visions of future drinks were dancing in my head. I had had no program, no strategies for (or commitment to) my sobriety. Now I do.

In 1978, when I began my new period of sobriety, I was scared half to death. I have wanted to retain the positive essence of this experience as a way of maintaining a healthy respect for my arrested condition. I wanted a life of sobriety this time, not dreams of future drinks. And I was willing to do whatever was required to achieve that.

Cognitive Sobriety

What is “cognitive sobriety”? “Cognitive” means knowing, learning, perceiving. We look at the world and our lives in a rational way and try to understand the dynamics behind issues and events. The current “just say no” philosophy doesn’t help people very much. How could it? We are thinking beings. We need to know how, we need to know why. Simple-minded slogans don’t fulfill these basic human yearnings.

Some “experts” on alcoholism feel that alcoholics can “unlearn” drinking behaviors and thus modify their intake. This is a ludicrous idea. I wonder, do they plan eventually to apply this approach to cocaine and heroin use as well?

Even though some addicted persons may be able to control their drinking for varying periods of time, what have they gained in the process? In his Natural History of Alcoholism, psychiatrist George E. Valliant writes, “Their situation [is] analogous to driving a car without a spare tire — disaster [is] usually only a matter of time.”

If an alcoholic chooses a life of sobriety, what has he or she lost in the process?

Reflections and Research

During my first year of sobriety I questioned a number of sober alcoholics, searching for the common thread for their successes in maintaining a lasting sobriety. When I was about three years into my sobriety, I began to challenge some of the concepts of Alcoholics Anonymous, but felt that I stood alone in that endeavor. By the time I was sober for five years, I had compiled an extensive file of responses and, from four years ago to the present day I’ve collected data from more than two thousand “sobrietists.” Both from this research and from my own experience of recovery, I have put together a specific secular approach to achieving and maintaining long-term sobriety. I call it the “Sobriety Priority.” I wish to offer it as a way (beware of anyone who offers the way) to achieve and maintain sobriety for life.

With the Sobriety Priority, arresting one’s chemical addiction and staying sober becomes the top priority. It is separate from everything else in one’s life, including religious or spiritual beliefs. Rather than turning one’s life and will over to an outside force or higher power, recovering alcoholics and addicts credit themselves daily for achieving and maintaining sobriety, empowering themselves, rebuilding self-esteem, and building the best possible protection against relapse. This is not a “spiritual” or “twelve-step” program. And it’s not a package deal. Achieving and maintaining sobriety is approached as a separate issue, not as part of a larger mystic/holistic plan that requires fear of one’s human imperfections. The Sobriety Priority method works. Thousand have used it successfully, not only for drug and alcohol addiction, but for other addictions, such as overeating and gambling.