Intervention Coach Manual

A Do-It-Yourself Guide for Families Impacted by Addiction



Intelligent Interventions

A Resource for Change

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This guide will help you plan and conduct an intervention for a loved one struggling with drugs or alcohol. It covers: selecting the right type of intervention to have, choosing the right people to be involved, handling objections, writing effective "intervention love letters," finding a quality treatment center, and more.

The ultimate goal is to get the addict into treatment and to assist the family to unite and join in the fight as a solution-oriented team member.

There *is* a way you can help this person change their life.

- How can we break the cycle of addiction in which the child follows the parent into addictive behavior?
- How can our children be best supported in leading healthy and productive lives? How can we break the cycle of inter-generational trauma and mental health outcomes?
- How can we educate families to provide the best support for a loved one experiencing an addiction problem?

When an addict comes to you for help, you have 3 minutes to show you care and to build some level of trust. This guide will give you the confidence, the knowledge and the resources on hand to know what to do next. The addict has taken months or even years to work up the courage to ask for some way to change this spirit-killing habit. If there is no hope for assistance from you, the addict will give up and not seek help again. This is your chance to show this person that there is an immediate hope to cling on to and a way to get off this merry-go-round of sadness and shame.

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Intervention?

An intervention is a deliberate process by which change is introduced into peoples' thoughts, feelings and behaviors. The overall objective of an intervention is to confront a person in a non-threatening way and allow them to see their self-destructive behavior, and how it affects themselves, family and friends. It usually involves several people who have prepared themselves to talk to a person who has been engaging in some sort of self-destructive behavior. In a clear and respectful way, they inform the person of factual information regarding his or her behavior and how it may have affected them. The immediate objective of an intervention is for the self-destructive person to listen and to accept help......OR

An intervention is a collective effort by those who care about a person engaged in a pattern of addictive behaviors. The ultimate goal is to get the person to begin treatment for the addiction. A part of achieving that goal is an open discussion of the addiction and its negative effects on the individual, as well as upon each member of the intervening group. According to the Mayo Clinic, a person may need an intervention if his or her behaviors have become compulsive, meaning that he or she continues to engage in behavior despite negative consequences, often denying the relationship between the behavior and the consequences.

An Intervention is all about concern and love, but it is also about being firm and united in letting the loved one know that concerned family members, relatives, friends and colleagues can no longer accept, and stand idly by, while the person they know and love destroys his or her life.

Should We? Shouldn't We?

Something must be done, but what?

- Have you tried talking to your loved one and been rebuffed?
- Have you pleaded, begged and even threatened to take drastic action, but to no avail?
- Has the pattern of destruction continued despite ever-increasing problems and consequences?

The Facts:

- They are probably unable to stop drinking or using, or
- Fallen into the cycle of stopping for a brief period, followed by further serious episodes.
- They have lost the ability to see reality, think logically and grasp the concerns of those that care about them.
- They are past the point of being able to see and understand what is happening to them and to others. Professional help is needed.

No More Waiting

An intervention is anything or anyone that gets between an addict and their addictive behavior. It was once believed that family and friends were powerless over the actions of their loved one until they "hit bottom." That theory has been shown to be a myth that is allowing addicts and families to suffer needlessly. An intervention can be a helpful tool for anyone who is resistant to addressing his or her problem. Often people who are resistant and enter treatment due to an intervention do very well. There are times a professional intervention is not necessary. However, there are times when an intervention is critical. There will be an intervention sooner or later whether the family intervenes or not. **Intervention is a choice.** A choice that says no more waiting.

Decision Time

If a loved one's behavior demonstrates obvious patterns of substance abuse and is having a negative impact on day-to-day living for him and those who care about him, it may be time to plan an intervention.

Modern medical, psychological and addiction sciences refute the myth that a specific "bottom" must be hit in order to have an impact on a suffering addict. Choosing to have an intervention is not an easy decision.

It is a confrontational act, forcing open communication on emotionally laden subjects that are usually not spoken about, and the whole thing feels scary and risky. The point at which families and friends believe that the situation warrants such a drastic move is complex but achievable.

Interrupting the cycle during the abuse phase is an opportunity to give the gift that offers ypur loved one a chance at a better life and a clear opportunity to make changes before things get really bad."

The National Institute on Drug Abuse describes addiction as a progressive, chronic and fatal and states that the sooner treatment is sought, the greater the likelihood of a positive outcome. Furthermore, treatment does not need to be voluntary to be effective. Heavy consequences or enticements from family, employment settings, and/or the criminal justice system can significantly increase motivation to enter into treatment and the ultimate success of drugs and alcohol treatment interventions.

Once the decision to intervene has been made, it is essential to thoroughly plan and prepare for the event. The interventionist will guide you through the planning and preparatory process and will, of course, be present during the intervention.

The Process

In a nutshell....

- 1. Meaningful persons in the life of the addict are involved.
- 2. All meaningful persons write down specific information about their experience with the addict including the events and behaviors involving the addict's substance abuse which legitimizes their concerns.
- 3. All of the meaningful persons tell the addict how they feel about what is happening in their lives and how it has affected their lives in a non-judgmental way.
- 4. The addict is offered specific choices—this treatment center or that hospital.
- 5. When addict agrees to accept help, it is made available immediately.

The first step begins here.

- · Meeting with an Interventionist
- Setting goals
- Strategy
- Plan your approach
- Set place and time of intervention
- Writing the Love Letters
- The Rehearsal
- Getting them into Treatment
- Post-Intervention
- Family Support Solutions

The Intervention process begins when a concerned person, or persons decides action must be taken because a life, family, marriage, career, health, finances or freedom may be in jeopardy as a result of problems with alcohol and/or drugs. From this point on, by following a closely orchestrated and comprehensive plan of intervention, the individual we love can begin treatment and recovery from the cunning, powerful and baffling disease of addiction

Meet with Interventionist



In an intervention, the interventionist works as a coach, a referee and a guide. The interventionist helps the family plan for this tough conversation, and provides guidance throughout the process to help ensure success. In order to do the job properly, an interventionist must meet with the family several times before the intervention is held.

During these planning sessions, the interventionist will provide information on the nature of addiction, and give background information on the nature of interventions.

The family will learn to:

- Describe how the addict's behavior is impacting the family
- Outline how long the addiction has been occurring
- Craft a specific goal for the intervention
- Provide background on the way the addict tends to behave when confronted
- Describe how previous interventions or addiction conversations have ended in the past

The initial meeting with the interventionist should include all persons that will possibly be present during the intervention. This may include family, friends, colleagues, co-workers, neighbors, clergymen, or anyone else that has concern for the individual The actual number of persons that will be present can range from just a few to a dozen, or more. The important thing is to have a united group of people present during the intervention that can offer support, love, compassion and firmness, but without judgment or anger. There may also be other participants that may not be able to be present during the intervention but will participate through letters or statements that will be read. During the initial meeting with the interventionist, the disease concept of alcoholism/addiction will be explained. Listen carefully and feel free to ask any questions. Also, express any fears or concerns you may have. You will be asked about your relationship with the person and what has occurred that causes your concern. The interventionist will provide step-by-step worksheets that should be completed prior to the intervention rehearsal.

Goals



Knowing the goals of an intervention helps both the interventionist and all other members of the team focus their actions. This collaborative effort greatly enhances the chances of success.

- Most interventions have at least one main goal to make sure the addict seeks
 treatment. This goal is accomplished by first helping the addict face the effects of
 addiction. Once the addict has accepted that he or she needs treatment, the
 interventionist provides treatment options the addict can take advantage of. It's
 advisable that a bed is reserved ahead of time at a treatment center, so the addict
 can leave the intervention and go immediately to treatment if they are amendable.
- Another goal of most interventions is to provide information and support to friends and family members affected by their addicted loved one's actions. Oftentimes, these victims require some form of therapy to help cope with the damage caused by addiction.
- Gauging the success of an intervention is done by evaluating whether the stated goals have been met. Fortunately, most interventions mediated by a professional have very high success rates, providing the addict with an avenue to recovery.

Remember that the primary goal of the intervention is to have the person accept the professional help that is being offered and agree to enter treatment at the conclusion of the intervention.

Strategy

Establishing Contingency Plans and Boundaries

According to a study published in the American Journal of Drug and Alcohol Abuse, 90 to 95 percent of people who abuse alcohol or drugs do not enter a treatment program to address the problem. An intervention allows the family to break the trend and push their loved one into getting needed help. All interventions aren't created equal, however. There are quite a few intervention types available, and types that work for one person may not work for another. An interventionist can talk at length with the family and determine the best method to use to hold the intervention.

Most interventions have a few basic traits in common:

- The family outlines specific instances where the addiction caused distress or harm.
- The family uses supportive and loving statements, avoiding words of blame or hostility.
- The interventionist remains in control and steps in if the family or the addict begins to lose control.
- The addict is encouraged to enter treatment at the end of the intervention.

During the rehearsal contingency plans will be discussed.

- What happens if the person refuses to listen and walks out before the intervention even begins?
- What happens if the person refuses to accept professional help and says they can stop or control drinking themselves?
- What if he/she says it's impossible to go to treatment today but promises to go next week?

During the rehearsal the interventionist will discuss these questions and others in great detail. We have heard of excuse in the book and every possible explanation not to go to treatment, and have met the challenge with great success by an experienced interventionist. Whatever way we perceive that intervention will not work or how the addict is not ready and will surely fail, It is absolutely crucial, however, for the group to remain dedicated to the process, focused with complete abandon and united in strength.

To Keep in mind: Alcoholism and addiction are powerful and the individual is firmly in its grasp. The enabling must stop now if the intervention is to be successful. In many situations, the alcoholic or addict has been enabled to continue a destructive lifestyle by family members, spouses, employers and friends. We may have been conflicted with the difficult question of why we continue to wait, to stand by and permit problems to continue and even worsen. Sometimes this is referred to as codependency. By allowing destructive behavior to continue, we help no one. Not the person we care about and certainly not ourselves. Unfortunately, it is not a giant leap that we are loving our addict to death. There is any number of reasons. If we continue to do what we do and get the same results or we can set healthy boundaries, or we will emotionally perish as well.

Plan and Implement the Strategy

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Location

It might be easy for family members and friends to spot addiction in someone they love. It might be more difficult for the addict to see his or her own behavior clearly. In fact, according to the Substance Abuse and Mental Health Services Administration, nearly all American adults who need treatment for alcohol abuse don't think they need help.

Breaking through this wall of denial takes a bit of effort, and that's why most interventionists suggest that interventions take place outside the addict's home. During an intervention, when the addict is confronted with the stark facts of an addiction, the addict might respond with a deep urge to simply terminate the conversation. At home, the addict can simply walk away to a back room when the tough talk begins. Placing the addict in an unfamiliar location allows the family to control the situation and help ensure that the talk moves forward.

Good intervention locations include:

- · The interventionist's office
- The addict's church
- A hotel room
- · A friend's home

The ideal site for an intervention is a non-threatening and comfortable environment for everyone. However, the home of the individual is not a good site because everyone could be told to leave immediately. The element of surprise is a key component to an intervention. In fact, without the element of surprise, an intervention may be very difficult to accomplish. Ideally, a friend or family member will drive the individual to a familiar and comfortable location. It may be uncomfortable but necessary to mislead the person about the nature of the trip. One thing that is absolutely essential is that the individual cannot be intoxicated or under the influence of any drug when the intervention takes place. Sometimes it is a good idea to intervene in the morning. The added advantage is getting the person to the treatment facility during business hours and to be able to meet his/her primary counselor. The main thing to remember is that all planning, preparation and rehearsals are complete before the actual intervention takes place.

Love Letters

An intervention can be incredibly stressful. Family members and friends are presenting extremely delicate information to someone who might feel hostile, angry or attacked. Working without a plan could make the intervention even tenser, as the family might be inclined to forget important details or simply succumb to emotional outbursts. Intervention letters can help make the process easier, as they provide a script family members can simply read out loud. Family members work closely with an interventionist to write these important letters.

A typical intervention letter is addressed to the addict and contains the following items:

- A statement of love and concern, such as "I am here today because I care about you and I want you to get better."
- Specific examples that illustrate the addict's destructive behavior, such as "Last Wednesday, I came to talk to you and I couldn't wake you up because you were drunk."
- A plea for the addict to get help, such as "I believe you can get better with the help of the treatment program we've chosen. Won't you at least try it?"
- Consequences that might befall the addict if the behavior doesn't stop, such as "If you won't get treatment, I can't allow my kids to visit anymore."

Bottom Lines

If a person does not agree to seek treatment after you finish reading the first three sections of your letter, you should proceed to your bottom lines. These are actions that show you are ready to stop enabling the person's addiction and start helping. **Warning: Only read your bottom lines if treatment is refused.**

If your loved one has already agreed to go to treatment, there is no need to introduce the stress of ultimatums. In addition, these should be actions that you will follow through with without wavering or compromising. The effectiveness of bottom lines lies in their strong enforcement, which often leads to your loved one accepting treatment.

Blind Spots
Note: you <i>must</i> be prepared to enforce your bottom lines immediately. Thus, they should be carefully considered based on their feasibility and practicality for you personally. Consulting with a professional is strongly suggested when determining bottom lines, because what may work in one situation may cause great harm in another
Name something specific you've done to enable the addict's use?
Name something specific you do now to enable the person's use?
What are you willing to do to completely stop this behavior?

The Rehearsal

Before, During and Happily Ever After?



Before the actual intervention takes place, the interventionist will guide the participants through a complete rehearsal. Often, this takes more time than the actual intervention. If the rehearsal is thoroughly and meticulously completed the actual intervention is often anticlimactic. Again, the success of an intervention is largely determined through planning and preparation and this cannot be overemphasized. If possible, the rehearsal should take place in the same room where the intervention will occur. Also, it is essential that everyone that plans to be present at the intervention be present at the rehearsal.

During the rehearsal, the speaking order and seating arrangements for the actual intervention will be determined. The interventionist may make specific recommendations based upon his experience. It is a good idea for the lead off speaker to be someone that is highly respected by the individual, sometimes a senior family member or well respected friend. Everyone will read his or her own letter aloud. At the conclusion of each letter it is important to reaffirm love and concern but also to ask the person to make the decision to accept the professional help that is being offered. The rehearsal will allow all participants to gain insight as to how the actual intervention will unfold.

Treatment

The Goal

The goal of any intervention is to push the addict into an effective treatment program. Ideally, the addict will go to that treatment program as soon as the intervention is over, and most addicts agree to do just that. According to the latest research, more than 90 percent of addicts agree to enter treatment at the end of an intervention. This means that families must have treatment arrangements complete before they hold the intervention.

Intervention specialists can provide invaluable advice to help families choose the right sort of addiction treatment program. In some cases, the addict will need specific medical help to remove the traces of drugs and alcohol from the body. In other cases, the addict might benefit from programs that allow him or her to keep living at home while heading to counseling sessions just a few times per month. The addiction specialist has specific knowledge that can help families make the right decision.

Once the interventionist and the family have chosen the method of treatment that will be most effective, the team can begin calling facilities. Often, families have many facilities to choose from.

It goes without saying that arrangements *must* be made in advance. The interventionist knows what treatment resources are available and, based upon the information given, will be able to recommend facilities that are clinically and financially appropriate based on experience. The interventionist will notify the facility of the date and time of the intervention and confirm that a bed is available before the intervention begins. Once the intervention is successfully concluded the interventionist will call the facility and let them know that the client is in route to the facility and the approximate arrival time.

Paying for treatment

Unfortunately, in the world of managed health care, it is very difficult to make prior arrangements for treatment. Until the individual has been clinically assessed and the managed care company has certified the individual for a certain level of care, there is no guarantee that any benefits will be available to pay for the cost of treatment. However, based on the experience of the interventionist as well as the treatment facility, an educated guess can sometimes be made. It is likely, however, that the treatment facility may require a cash or credit card deposit to guarantee admission. The family should make financial arrangements directly with the treatment facility. Sometime it is necessary for the family or individual to pay for the full cost of treatment.

Off to Rehab

Clothing, personal grooming and hygiene needs should be packed and in the car that will transport the individual to treatment before the intervention begins. It is not advisable for the person to return home to pack for an obvious reason; *they may change his/her mind*. The dignity of the individual *must* be respected. Even when the person accepts treatment, it is necessary to deal with *real* but unexpected or unknown last minute issues or circumstances. However, the most ideal situation is for the individual to proceed with a family member and/or friends directly from the intervention to the treatment facility.

Post-Intervention

Rehab

A family focused on planning an intervention may spend a significant amount of time talking about the addict's rehab program. The family will also be curious on how to communicate with your loved on e in treatment. Some families want to know how they can get them into rehab. Most families want to know what to do after rehab ends. The treatment center will initiate processes that will help your loved one cope with the outside world. As important as this program might be, conquering addition often means more than simply completing a treatment program like this. In fact, most addicts cannot do it alone and will certainly need a significant amount of help for months or even years in order to truly heal.

The Facts: relapse rates among addicts vary between 75 to 92 percent. In order to ensure that the addict truly does stay away from the addiction, the addict needs to develop an aftercare program that begins when intensive treatment programs end.

An aftercare plan may include:

- 12-step meetings, such as Alcoholics Anonymous or Narcotics Anonymous
- Private addiction counseling
- Transitional living, such as sober living communities
- Urine testing to screen for drug use
- Maintenance medications such as methadone or buprenorphine

The Family

Family Recovery

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Others Who Love an Addict



It's been said that addiction recovery is a process and not an event. In other words, the addict as well as the family, will need to initiate and maintain the work his or her recovery for the rest of his or her life. The family has more power than they realize. Using that power incorrectly can be devastating to the process of recovery. Family members *must* stay committed to that recovery for the long term.

Providing this sort of support means staying involved. It means learning to love your addict in new ways. While the addict is ultimately responsible for doing the heavy lifting and following all of the steps outlined in the aftercare treatment program, the family plays a key role by:

- Not using drugs or alcohol in the presence of the addict. If the person is recovering from a shopping addiction, the family should avoid excursions to the local mall. Removing temptation from the addict's immediate presence is a way to show solidarity.
- Providing a listening ear. The addict may need to talk, at length, about the addiction or the addict may want to make amends for past wrongs.
- Supporting therapy. Offering to drive the addict to appointments or meeting the addict for coffee after a meeting is a subtle way of showing support.
- Expressing pride. During an intervention, the family talks at length about the addict's destructive, disappointing behaviors. During recovery, families can turn the tide by expressing their happiness at the changes they see.

If families are to begin the process of change they *must* internalize and accept the following concepts

THEY DID NOT: CAUSE IT THEY CANNOT: CURE IT

THEY CANNOT: CONTROL IT

THEY CANNOT: CHANGE IT

Family Support



Family support is an absolute necessity to begin to initiate the intervention process and integrate into a recovery lifestyle. Family support contains a series of spiritual and intervention practices that help family members cope with the effects of their loved one's addiction and the roles they played contributing to the addiction process. Our interventions focus solely on the family first as a means-to-an-end with the purpose, at this time, of getting the addict the help they deserve.

Family members are incapable of having the amount of impact required to motivate the addict to switch gears. The emotional baggage accumulated over the years has caused deep resentment, hurt, confusion, and anger when it comes to confronting the addict. This is counter-productive to the recovery process and may lead to future problems with both the recovering addict and the affected family members.

In any intervention for an addict, the disposition of the addict's family is exceedingly important. Full recovery involves not only restoring the addict's life, but restoring our own. What we ask of the addict is what we must do if we are to help ourselves. When we stay out of the tendency to enable the addict, we stay out of the default mode that suck us back into behaviors that are not consistent with our own recovery or the recovery of our loved one.

Addiction is often referred to as a "family disease" because it affects not only the afflicted individual but also his or her family and friends. It is not easy recovering from the strain that a loved one's addiction has put on you emotionally, mentally, and physically. Many treatment facilities offer programs designed to help family members cope with the damage caused by a loved one's addiction while repairing their relationship with the individual. In addition to a rehabilitation center's family program, you should also take advantage of these available resources:



Support Strategies

Family support is focused on discovering any problems between the family and the addict and repairing any damage that is found. Family support strategies include:

- Providing information. Often family members have been living in the darkness
 where addiction resides and have been living with incomplete understanding
 about what the addict is going through and the effects that addiction has on the
 inner workings of their family. Obtaining the facts about addiction and not living
 within the myths alone, deepening the understanding of the underlying truths on
 the circumstances confronting the family will empower, support and motivate the
 family.
- Family Therapy. Including the whole family in the therapy process (including the
 recovering addict), health care professionals are able to assess and address any
 problems existing between family members. The overall goal is to help ensure
 that the family provides and maintains an environment that helps that addict stay
 drug-free and the family remain enabling-free.
- Counseling. Family members often need individual counseling, which can
 provide them information on how to cope with the problems that exist and may
 arise. Counseling is an opportunity to also gives a therapist the opportunity to
 teach family members the unique tools and specific self skills that will help them
 understand their role in the addiction process and to begin to restore and/or
 repair any damage to their relationship with the addict.
- Respite. An addict's family is often subjected to long-term stress. This places a
 palpable emotional burden and psychological baggage on each family member
 whether they share a residence or not. The collateral damage is demonstrated
 as a ripple effect from primary relationships to secondary relationships such as in
 the in-laws, grandma and grandpa, cousins, aunts and uncles, etc. Once the
 problems associated with addiction have been brought into the light and treated,
 this baggage is lessened and burden decreases. The goal of any intervention is
 to improve the lives of not only the addicts, but also the lives of all family
 members.

- Telephone hot line. The timing of addiction-related emergencies or problems is typically unpredictable. Family members may suddenly experience severe depression or anger in regard to the situation. A 24/7 telephone hot line provided by Intelligent Interventions the family with an avenue for them to seek help at all times.
- Family support groups. It is not a big leap for families going through similar addiction-related conditions feel disconnected, isolated and truly believe they are alone and separated from the rest of society. This is not true. By bringing families together, they can learn to support each other during times of crisis. There are many families who may be going through a similar set of circumstances. However, the dynamic in these family support groups must constantly be monitored to ensure that the group relationships are balanced and managed in ways that support the group as a whole and not so much the individuals involved.

What if....?

What if the answer is no?



Unfortunately, not all interventions are immediately successful. The addict may not accept treatment or may deny that they have a problem. Anticipating this possibility and planning a strategy to deal with the resistance often provide an avenue for future success.

During the pre-intervention, the interventionist apprises all the team members of the plan that should fall into place if the addict stays resistant. Each member will be given a set of instructions that stops them from enabling the addict. This is where the family writes their bottom lines as to the consequences of refusing and resisting help.

Do not get angry or violent if the addict refuses treatment. By staying positive and refraining from actions the allow the addict to continue his destructive addiction, you increase the chances they will seek treatment in the near future. Remember that half of the addicts who initially refuse treatment decide to seek treatment within a few weeks following an intervention.

What If They Refuse?

Keep trying. Don't give up! Remember the life of your loved one depends on your continuing commitment. Sometimes it takes the team more effort to break down the defense systems that addiction creates.

Rationalization, projection, denial, repression and self-delusion combine to create a barrier to self-awareness that rivals the Great Wall of China.

But what of the truly "incorrigible", treatment-resistant drinker, the one who walks out of the intervention, or the one who is "too far gone", the one who is constitutionally incapable of getting help? If that person continues doing what they are doing and never enters treatment, has the intervention been a failure? No, it has not. *Properly done*, intervention works every time! *Properly done*, there are no failures. Turn the page to find out why........

Failure? No Such Thing!



The person doing the intervening—the team members—are forever changed. They have learned that they are not alone. They learn that help and support are available to them at any time. Their lives are never the same.

The family unit is changed—from the frozen, immobilized, fearful, guilt-ridden and shameful group they once were to an entirely new dynamic. They know what addiction is. They see the symptoms in themselves, and they seek help for themselves. They come to believe that the disease is not their fault. They have learned to liberate themselves.

The addict is changed in relation to the addiction. The crack in the wall of defenses has admitted knowledge that they will never again fully deny. Their addiction has been exposed.

- Interventions always have some effect.
- There is no way it can make any situation worse.
- It offers a chance for recovery where before non existed.
- It starts a process that allows loved ones to free themselves
- The family gains a new connection with each other and the disease.

Resources



For additional information on addiction, interventions, and rehabilitation facilities, you may find the following resources helpful.

- Psychology Today http://www.psychologytoday.com
- SAMHSA http://www.samhsa.gov
- The National Institute on Drug Abuse http://www.drugabuse.gov
- AA (Alcoholics Anonymous) http://www.aa.org
- NA (Narcotics Anonymous) http://www.na.org
- Al-Anon http://www.al-anon.org
- CoDA (Co-Dependents Anonymous) http://www.coda.org
- ACOA (Adult Children of Alcoholics) http://www.adultchildren.org



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