

What treatment method or facility will you use?

First, what is the desired product of the intervention? This means, if the addict or alcoholic agrees he/she has a problem and wants help, you need to know what that help is. It is advisable that the parties doing the intervention agree on what program or method will be best for the addict once he/she has agreed to receive help.

There are thousands of programs and many philosophies or approaches to treatment and generally the addict needs help in identifying one that is right for them. The result of which program or approach he/she goes to will determine if the addict or alcoholic relapses after treatment causing much greater complexity and further risk as well as continued pain and struggle for those around them. Once the intervention team has decided on the treatment they intend to propose to the addict, they should contact the facility of their choice. They will need to determine admittance procedure; financial obligation as well as specific questions that remain about what treatment the addict will receive.

Remember we're talking literally about the addict or alcoholic's life and general quality of that life so doesn't hesitate to be inquisitive. If the prospective treatment centre doesn't adequately answer all pertinent questions or they are illusive as to expect out come of treatment the family may want to consider a second opinion. Addicts live and die by their ability to recover so this is not a decision to be taken lightly.

What is the ruin of the addict or alcoholic?

The addict or alcoholic has things in his/her past or present that seem like devastating events and which has something to do with drugs or alcohol. One example is a person that has lost his best friends due to his addiction. Another example is a person losing his wife and child over drug or alcohol abuse. A family member can look at an addict's life and see hundreds of reasons he/she should quit using but unfortunately these reasons are not **REAL** to the addict. There is however problems the addict encounters that he or she perceives as real or significant to their own life, which he/she sees as a reason to quit using drugs. These are important to identify because they can be used during the intervention to remind the addict or alcoholic why he/she must seek help.

What pressures does the addict feel now?

The addict doesn't necessarily have the same reality about their addiction that non-addicts might. For instance, he/she may have semi serious health problems, lack of friends and job or income but feel like they are "doing OK". Many addicts have actually overdosed on drugs coming very close to death and are right back

using drugs the very next day. This may appear crazy but in fact is only part of the pain for the addict.

With this in mind, the addict from time to time will encounter added pressure, which forces them to make an actual decision about whether to seek help or continue to use.

Pending legal charges that could easily lead to jail time, threat of losing spouse, pending loss of job, all are possible situations where a person has enough pressure to fight the addiction and seek help. Although any one in particular may not work in your situation, there are pressures that can come to bear which will help prod the addict into a decision to seek help. It is easy to assume the addict is “only seeking help to avoid jail” or some other evaluation which in many cases is true. The fact remains that an addict will only seek help when some one or some thing pushes him out of his “addiction comfort zone” and forces him into a decision. Very few addicts with access to money, a place to live, people who agree with his usage and no legal issues seek help. They “don’t have a problem”. This is very important to understand and will be crucial in any attempt at intervention.

Who should be there?

One of the major considerations involving intervention is selecting who will be there. This matter should be well thought out before hand. The number of people there is less important than who is there.

If at all possible, the person in the family whom the addict respects the most should be there. This person is an opinion leader to the addict and needs to be there fully supportive of getting the person help and informed well about the actual agenda.

As many family members as possible should be there as long as each and every one are completely in agreement about the fact that the person needs help and supportive of the general agenda. If someone in the family is antagonistic against the addict and is not capable of restraining themselves from arguments and blame then you might consider leaving them out.

Usually, the addict has many enemies and has done wrong to most of the family. But arguments that are agitated and disturbing will not benefit the cause of getting the addict to seek treatment and in fact will usually result in stopping this from happening because the focus of attention gets placed on the argument and not on the matters at hand.

Many people hire professional intervention counsellors to run the intervention. This is advisable in many situations but not a necessity in most. This depends

largely on individual circumstances. For instance, does the person have pending legal issues, external pressures etc. or does the person deny completely any drug usage. These type factors need to be considered intensely before bringing in an outside person.

You may want to seek help in establishing who should be present at the intervention because it is a crucial factor.

When is the appropriate time?

When does the intervention take place? Ideally this has less to do with the family schedule and more to do with what's going on in the addict's life.

The optimum time for an intervention is just after a major event. Such an event would be arrested, or when he/she has wronged (lied, stolen, cheated etc.) a family member and shows remorse or guilt. Another would be spouse leaving. Yet another would be after an overdose. Although you obviously don't want to risk the addict's life by postponing forever, an intervention will be exponentially more effective after such events when the addict is down and feels like his/her world is coming to an end.

Even in the absence of these situations, an intervention can be successful especially if the family is close to the addict daily so that every little situation is known. An addict's life is a major roller coaster and the only way an addict can deny their problem is to successfully hide these problems from those who love him.

A major consideration should be when the addict is sober. In the case of cocaine, meth- amphetamine etc. this should be in the morning after the addict has slept. In the case of heroin or methadone or opiate type drugs, it will be when they are withdrawing and not high. In either case attempting an intervention while a person is extremely high will usually not be productive because the addict can not see many of their problems and their attention will be fixed elsewhere.

In general, the timing of the intervention is crucial and needs planning but at the same time an addict's life is very unstable so opportunities present themselves reasonably frequently.

What is the general language or message?

The tone should be concern. The intention should be clear. It should be unwavering.

"We love you, we've always loved you, we'll never stop loving you but we're not willing to watch you kill yourself with drugs".

The family should definitely express concern but not sympathise with the addict. Sympathy is a form of agreement and can back fire by justifying the addiction.

Without any anger or fear, the addict should “get” from every one present that the situation is known and that he/she needs treatment. **Don't allow stories of family problems and life's troubles sway the attention off the point that the addict has a problem and needs to seek help fixing it.** This is where the family's preparation pays off.

Interventions have approximately a 90% or better success ratio with proper planning and carried out correctly, by success I mean an addict or alcoholic getting into successful treatment. You must accept the fact that ultimately the addict may for whatever reason refuse the offer of help. Any one planning to conduct an intervention should be prepared to have the alcoholic or addict outright refuse help in this case be prepared to execute **plan B**.

What is plan B?

If the Alcoholic or Addict chooses to refuse the help being offered the family and friends should not feel that they have lost the battle. Rather they now have an opportunity to further impose their will upon the Alcoholic or Addict. Their advice and actions at this point will have a critical effect on the person.

Upon having refused the help being offered the Alcoholic or Addict is essentially saying *“I want to continue to use drugs. I want to continue the suffering. I want to be in control.”* The alcoholic or addict will from this point be in control if the actions and words of the family aren't extremely clear. The family needs to acknowledge the Addict or Alcoholic's decision but refuse to aid or support the individual in any unsuccessful action. This means they can no longer reside at the family's house and can expect no financial help. Then the Addict or Alcoholic is alone to fend for themselves but they know they have the option to get help. Soon it will be clear that there is no other option.

Obviously, there are certain risks involved with either approach and should be evaluated clearly before hand. One thing is certain, as long as the addict continues to use, they risk the only one thing they have; their life.

The simple rule is that the Addict or Alcoholic must choose for them selves to get help or it is doomed to failure when a person is forced in to treatment the likelihood of success is diminished. What ever the Alcoholic or Addict chooses has a significant chance of helping that individual so anyone attempting to help an Alcoholic or Addict must remember that they are not trying to think for the individual rather they are trying to stimulate that individual to think positively for themselves.