**Drug Abuse Intervention**

**Is your loved one in denial about the severity of their drug or alcohol abuse?**

**Have you tried to talk to them about their problem, but they're unwilling to accept help?**

Correct intervention helps families identify what needs to change in order for things to get better. How many times have you been told that your loved one has to want help or hit bottom before they can get well? Addicts and alcoholics teach families enabling behaviors such as guilt, hope, fear and victim to keep the family from changing.

While a family is waiting for their loved one to want help or hit bottom, the addict is manipulating them so they are kept comfortable at the expense of the family. Guilt is when your taught it’s the family or someone else’s fault, hope that one day they will change on their own or they will move out of your house and find a job, fear that if you try to intervene they will run away or possible kill themselves if you make them go for inpatient treatment and lastly victim is taught when they make you believe that if you had their miserable life you would do the same thing as them.

An intervention is just as much if not more for the family than it is for your loved one. The addict can’t get high on their own resources alone; they need people, places and things to help them do it. The family has full control of the situation, they just have to be shown and taught how to apply it. Because of the emotional attachment of what is involved in a successful outcome for an intervention, it is important to consult with a Christian intervention group like Teen Challenge before attempting anything with your loved one.

The goal is to not only have your loved one accept help and willingly accept treatment, but also provide the family that they can do things differently tomorrow. The sad truth is tomorrow comes and nothing changes. Most of the addicts are in denial of their addiction because they believe that the problem is everything but them. Drug intervention almost always deals with stubborn, self-centered, and self-absorbed people who take no accountability for their actions and blame their problems on every other person, place or thing.

Drug addicts also lack responsibility. Very rarely when doing a drug abuse intervention do we have a person who is completely willing and makes no excuses or denials. Drug abuse intervention educates families and teaches them what level of cares your loved one needs and how to offer it in a loving and non-confrontational way.

**Information about Addicts**

A substance abuser is almost always willing to do the shortest and quickest level of treatment close to home without proper intervention for drugs guidance. This will cause serious problems because, just like with everything else, drug addicts are focused on instant gratification and taking the path of least resistance. That is one of the reasons drug addicts self-medicate by abusing drugs.

It is often the case that the family pays the bills, provides the car, buys the food, and pays for a lawyer, etc. while the drug addict is running the show. Addicts convince their families that if confronted with drug abuse intervention they would walk away or not follow through. Addicts try to manipulate their families and loved ones, convincing them that the way things are now is the way things should be. Addicts try feverishly to convince the family that they can fix the problem themselves by going to meetings or seeing a psychiatrist. They also often promise loved ones that if something bad were to happen they would simply stop abusing drugs. Almost all addicts sincerely feel they can just stop, or even control their use, if they just try hard enough.

Drug abuse intervention focuses on the fact that your loved one is the least qualified person in the entire family to diagnose and treat themselves. Up until families decide to do a drug intervention, the addict’s best thinking will be to take drugs. Until the addict is willing to accept responsibility for their addiction, it will continue to get worse, eventually ending with the addict in jail, an institution, or dead.

**When to Seek Drug Abuse Intervention?**

Families almost always call about an intervention when their loved one’s lifestyle comes to a point where they are spiraling out of control, and their actions are affecting the family (as well as themselves) on a large level. If a family is seeking consultation for drug abuse intervention, we can only assume that things at home in the substance abuser’s life are not going well. Don’t wait for your loved one to hit rock bottom on their own, by then it may be too late for them to accept help.

**Why Drug Abuse Intervention?**

Drug addiction can destroy any family or anything in its path if not confronted and handled properly. Fortunately for families and substance abusers there is intervention available for drug addiction. Most families are unaware of what to do or where to turn when a loved one is addicted to

Drugs. With proper professional guidance, families can confront this addiction head-on and begin getting their lives back in order. Until the family comes together and makes the decision to seek intervention, the drug abuser will continue to hurt themselves and everyone around them.

Drug abuse interventions are needed because addicts make their families believe themselves to be the problem. A good drug intervention program will teach family members to recognize all of the addict’s attempted manipulations. Families always want to know what will happen if the drug abuse intervention fails, what happens if we cannot help. Drug abuse intervention is almost always successful because it is not that only help the family confront the situation, we also get your loved one willing to accept help through accountability and responsibility for their addiction.

**How Drug Abuse Intervention Works?**

Drug addiction is a 100% fatal problem that is also 100% treatable. Drug abuse intervention explains to families and substance abusers how to make the family less accountable and the drug addict more accountable for the drug addiction. Family roles are always a major factor for interventions because the addiction creates family roles that cushion and enable the addict.

Families are taught at interventions how important it is to change behaviors that will make the addiction more difficult for their loved one. It is true that addicts need to feel some sort of a bottom, and that cannot happen if everyone is aiding and supporting them in their drug habits. Effective interventions are designed to get your loved one willing to accept help and go directly to treatment. It is important for families and addicts to understand that intervention is built on the foundation that the problem is the addict and not necessarily the drugs themselves.

**Family & Codependency**

Over time people get comfortable in daily routines and behaviors the longer it goes on. People who abuse drugs and alcohol get comfortable being addicts and alcoholics and families get comfortable enabling them. It is similar to a person in prison, the longer they are in the more comfortable they get. It is not uncommon for an inmate to actually be afraid to leave prison because they have become accustomed to the daily routines of jail. Families doing an intervention is the identical thing of an addict or alcoholic entering treatment, until both happen neither are truly ready to face change.

Below are examples of relationships:

**Basic Effects of Relationships**

Before we break down these roles, we must first understand some basic effects of relationships. It can be said that when two or more people become connected in a relationship of any form (work, romantic, friend or family) then those people within the relationship will do one or more of three things:

A person will assume some of the qualities of the other.

A person will assume a role that compliments the qualities of the other

A person will assume a role that acts counter to the qualities of the other

The most important thing to understand about the previous 3 statements is “when two people connect or enter into a relationship of any type, then both parties end up changed as a result of that connection.”

A family member will assume some of the unhealthy behaviors of the substance abuser.

A family member will assume a role that compliments the unhealthy behaviors of the substance abuser.

A family member will assume a role that acts counter to the unhealthy behaviors of the substance abuser.

If you take this a step further and replace the words “family member” and replace it with yourself, and replace “substance abuser” with the name of your addicted loved one, then things will become even clearer. Remember, you have been changed as a result of your relationship with someone addicted to drugs or alcohol. The degree to which you have been changed is dependent upon the strength and length of time of the connection.

**Family & Enabling**

Families enable for the same reason their loved one gets drunk or high; because it is a comfortable alternative to confronting the situation. Most families we consult are shocked when they finally realize that enabling to a family is an addiction very similar to the addiction the addict or alcoholic has. Enabling is a learned behavior that is taught to the family over time by their loved one to keep their addiction comfortable. As we discuss in other sections of our website, families are taught to keep their loved ones from wanting help or hitting bottom while society such as doctors, psychiatrist, therapist etc. back up the ridiculous notion by telling families they have to wait. The only one who gets ahead with this concept is the addict or alcoholic. Below are four examples of enabling behaviors taught to families by their loved ones to help keep the addiction comfortable at the expense of the family:

**Guilt** - Addicts and alcoholics teach families that it is their fault and that everything bad that happens is because of some other person, place or thing. Because families feel guilty, they then enable.

**Fear** - Families are taught that if they try to intervene, set rules and boundaries or make them go to rehab they will hate the family forever, they will never talk to them again, the will commit suicide or they will die if they stop.

**Hope** - Your love one tries to teach you that they will stop on their own and that they have a plan.

Families then believe them despite all attempts that fail. You then start to believe if they get arrested just once, get that right job or just meet that special someone this will all go away. Your loved one teaches you to wait and do nothing.

**Victim** - All addicts and alcoholics become professional victims. They constantly think to

At Family First Intervention we teach families how to change enabling behaviors so that their loved one becomes accountable. Families think that if their loved one is left on their own they will die at the hands of their addiction. An addict or alcoholic is far more likely to get worse being enabled and far more likely to get better when they become uncomfortable when the enabling stops. Enabling prevents an addict or alcoholic from wanting help or hitting bottom.

The problem is that everyone tells the family they have to wait for bottom but their enabling behaviors prevents that from happening. Nobody pulls up to an AA meeting in a limo, until your loved one becomes uncomfortable in their addiction and accountable for their own actions, not yours, they can’t get well. Your loved one can’t get drunk or high without your help.

**The Success of Intervention**

At times families define success rates by our ability to successfully “talk” their loved one into treatment. Although establishing that connection, what we say and how we say it is extremely important to the process, what defines the success rate of an intervention is the families ability to follow our directions, set healthy boundaries and hold their loved one accountable.

Every one tells us you have to wait for bottom or for them to ask for help when all along they have manipulated the situation so that neither of those things will happen. The system needs to change, trying to change the addict or alcoholic doesn’t work, you have tried it a thousand times with contracts and countless broken promises. Your loved one has created an environment that makes their life as comfortable as possible at your expense.

The intervention is just as much for the family as it is for your loved one needing help. As we say time and time again, families have control over when the bottom is hit and when your loved one wants help. An addict or alcoholic can’t get through their addiction without the help of their family.

After an intervention both the family and their loved one are in treatment so to speak, and if the family relapses and goes back to enabling, the addict or alcoholic is sure to follow. The success rate of the intervention and the treatment centers ability to provides long term sobriety can change instantly if the family does not follow through with their boundaries and hold their loved one accountable. The intervention is not an event it is a process, just like your loved ones recovery.

Here are some facts on success rates of an intervention: Interventions don’t fail, people fail to follow the directions of the intervention counselor or organization. An addict or alcoholic will almost always go back to active addiction if the family goes back to enabling them. Even if your loved one says no at the intervention, the family has to try. Waiting for them to hit bottom or want help will never happen if the family continues to make the addiction easy for the addict or alcoholic.

Interventions are very successful the day of the intervention. Should someone refuse help and fall into that failure category any future success will be fully dependent on the family following directions and setting healthy boundaries. As we tell families time and time again, almost no addict or alcoholic can be a successful addict or alcoholic without a family that enables them to do so. People who have cancer do not stop moving forward with Chemotherapy or radiation because the doctor does not give them a 100% success rate. They try everything they can to help them get better and the family does also to ensure that they did everything they could regardless of the outcome.

**Article: Drug Abuse Intervention - Intervention Programs | Family First** [**http://family**](http://family) **intervention.com/programs/drug-abuse-intervention**

**The Intervention Letter – The 5 Essential**

**Components of a Successful Intervention Letter**

John Lee, Editor

You run an intervention to break through a wall of denial and to convince a loved one to get the help they need. During an intervention, you need your loved one to feel concern and compassion rather than blame and shame and he or she needs to understand how serious things have become, how the behaviors of addiction affect everyone in the family and that things can’t go on as they have been any longer. An intervention’s persuasive strength emerges out of the compassionate repetition of the facts of the situation from all loved ones assembled for the meeting – so it’s important that everyone participating be ready and able to communicate the necessity of treatment.

However, because interventions can get emotional and because you need to stay focused on conveying an important and compassionate message, you should always write out what you want to say in advance.

**The Intervention Letter**

The script each person reads during a family intervention is called the intervention letter.

Ideally, you want your letter to:

1. Communicate genuine love and compassion, and to convey that you only want to see your loved one get better

2. Help the subject realize the severity of their situation

3. Help the subject to understand that their ‘private’ actions cause hurt and pain to those who love them

4. Clearly express that you wish them to accept the offered treatment

5. Clearly express the consequences you will impose if they choose not to accept the treatment that is offered

To ensure that you include all the necessary ingredients, try writing your intervention letter as 5 separate segments that make up a powerful whole.

**Section 1 - Communicating Love and Compassion**

In the first section of the letter you write to remind the subject of your love and concern, of shared emotional bonds and of memories of good times that precede the current situation.

For example:

“Brother I want you to know that I really love and respect you. You always looked out for me while we were growing up and sometimes I wish we could go back to those summers we spent at the cottage as kids, when it was just you and me playing in the lake from dawn till dusk. I have always admired you and when you moved out and got that big job in the city it inspired me to start working a little harder so I could get a good job like you someday. “

It doesn’t matter what you say, as long as it’s genuine.

**Section 2 - Writing about the Seriousness of the Current Situation**

Many people use denial as a defense mechanism to avoid confronting a problem. In this second segment you need to get your loved one to understand how bad things have become. To help circumvent denial and because your loved one may be ready to dispute your statements you should offer incontestable facts as examples of the severity of the situation, rather than opinions. To avoid getting bogged down in a distracting semantics debate, you’re better off avoiding labeling words, like addict or alcoholic. You don’t need to convince a loved that they are an ‘alcoholic’, but you do want them to see and accept, for example, that the drinking is affecting their health. Offer a few factual examples of how you see the drug or alcohol use degrading your loved one’s health or quality of life.

For example:

“Son, I can see that alcohol is causing you significant problems in your life. Over the past 3 years you have been arrested for 3 DUIs and on the last occasion in September you had to spend 2 weeks in jail and you lost your license and your job because of it. You have dangerously high blood pressure and drinking makes that worse. You are not supposed to mix your medications with alcohol but you drink on them every day. Your ex wife Christina listed your drinking as one reason for her divorce application and as a reason why she deserved (and ultimately received) sole custody of your daughter Jessica.”

**Section 3 - Writing about How the Abuse Affects You Personally**

This third segment also aims to puncture through the fantasy of denial.

In the previous section you listed undeniable facts as evidence of the severity of the problem, and in this section you list specific examples of how your loved one’s substance abuse has done you personal harm – and how you have felt because of it.

To defeat the, “It’s my body I can do what I want with it!” mentality, you want to illustrate that though only one person ingests the drugs or alcohol, the consequences of that abuse get shared out across the family.

For example:

“Mom, last month I asked you to come to my graduation ceremony. When you got there I could tell that you had taken a lot of pills because you were slurring your words and walking unsteadily. During the ceremony you fell asleep and everyone noticed and I was really embarrassed and felt really sad. It was supposed to be my day to feel good but it turned into just another day when I had to be worried about what you were going to do.”

You don’t want your loved one to write off your words as the product of isolated incidents, so it’s best if you provide a few examples of the consequences you have observed and the consequences you have experienced personally.

**Section 4 - You Ask Your Loved One to Get Help**

You gather in an intervention to ask a loved one to accept the treatment help that is offered.

“I care about you. I want to see you get better. Will you please accept this offer of addiction treatment?” There is power in the repetition of this request. It’s useful for every person at the intervention to ask directly so that the subject of the intervention understands clearly that everyone assembled wants the same outcome.

**Section 5 - You List the Consequences**

An intervention is an expression of love, but by necessity - it is sometimes an expression of tough love. You run an intervention to get a loved one into treatment as quickly as possible, and though there is real power in stories of hurt and love, you sometimes need the carrot and the stick - and this is where the consequences segment of the letter comes into play.

Every person participating in the intervention needs to decide on some consequences to impose if the treatment offer gets refused. You must be willing to carry out any threatened consequences, the consequences should take effect as soon as possible after a refusal to accept help and you should make sure you clearly communicate the exact nature of the consequences in this last part of the intervention letter.

For example:

“Son, I love you too much to watch you hurting yourself any longer. If you choose to refuse this offer of treatment then you can no longer live in my house and I will no longer support you financially.”