

RECOVERY ALTERNATIVES

Contact us at:

1-800-805-0499

<http://www.recoveryalternatives.com>

INTERVENTION PREPARATION WORKSHEET

To help guide you through the process of preparing for the intervention, a series of questions are presented below. Each of these questions is designed to cause you to think back through the history of your relationship with the affected person as well as your current relationship. After completing the questions you may find it helpful to review your answers when preparing your letter to the individual. The suggested format for the letter generally follows the series of questions.

1. What are your individual and specific concerns about the individual that are related, either directly or indirectly, to alcohol/drug abuse?

2. What events have actually occurred that causes you to be concerned? List specific examples in detail and provide dates, places, names, and events.

3. How have these occurrences and concerns made you feel about yourself, your family and the individual? Be specific.

4. What have been some of the specific consequences of continued abuse of alcohol/drugs? Consequences could be relational, financial, health related, legal or social.

5. What was your relationship like with the individual before alcohol/drugs became a problem? What sorts of things did the person enjoy doing or enjoyed doing with you that have been impacted?

6. What would like to see your relationship become once the individual has addressed the problems with substance abuse and received professional help?

7. What are the specific consequences with regard to your relationship with the individual if professional help is rejected and the abuse of alcohol/drugs continues?

INTERVENTION PLANNING

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. 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.

Intervention planning and preparation will include:

An initial meeting of family/friends with the interventionist discussing in detail the history of the individual and his/her problems with alcohol/drugs. The interventionist will provide step-by-step worksheets to guide everyone through the planning and preparation phase.

- Writing a letter to the individual (more about this later).
- Rehearsing what will actually be said to the individual during the intervention by each participant.
- Determining intervention strategies that will be used.
- Establishing boundaries and a contingency plan.
- Making the admission and financial arrangements with the treatment facility.
- Selecting the site, date and time for the intervention.
- And finally, once all of the plans and preparation have been completed and rehearsed, the actual intervention takes place.

Initial meeting with the interventionist

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.

Writing a letter to the individual

An intervention is stressful for everyone. Emotions may unexpectedly surface during the intervention despite having rehearsed what we are planning to say to the individual.

Sometimes it is simply hard to remember and convey everything we want to say. It is a good idea to write a letter to the individual and bring it to the rehearsal and read it aloud to the interventionist and group. Many times this is also a very emotional moment. That's OK. It's understandable. Sometimes many years of pent up feelings, pain, anger, resentment, worry and fear may suddenly surface and reading the letter can be a very

difficult thing to do. However, it does begin the healing process and it is better to let our emotions emerge than it is to try and continue to stuff our feelings. As we read our letter during the rehearsal, the reality of the actual intervention begins to unfold. Yes, we are soon going to finally confront the disease. Remember, too, that we are confronting a disease and not personally attacking the individual. The individual is a sick person, not necessarily a bad person, although the disease may have caused many bad things to happen. Here are some things you will want to try and convey in your letter:

- Begin the letter by expressing your love and concern. Talk about happier times before alcohol/drugs became such an enormous problem. Let the person know that the entire group shares your concerns but also shares in the hope that the individual will accept the help that is being offered. Let the person know that you think he/she is beyond the point of being able to help him/her self but that professional help is available and has been arranged. Ask him/her to make a decision to accept the help that is being offered.
- Next, be very open, honest and direct about your concerns. Cite very specific examples of things that you have seen or that have occurred that are directly related to alcohol/drugs. Be very graphic, descriptive and specific about dates, times and places and events. Remember, we must break down the denial that a very serious and uncontrollable problem exists. Don't minimize. We're not trying to shame the person but many times the individual doesn't realize, and sometimes doesn't even remember, what all has taken place. We are trying to create a moment of clarity for the individual so that they may see, for a moment, just how bad things really are. We don't hold back at this point. We want him/her to see exactly what others see.
- Let the person know how these things have made you feel. Let him/her know about the pain and worry and fear you have felt. Again, we're not trying to heap shame or guilty, but it is OK to let him/her know how the use of chemicals has made us feel and what it has done to us. Also, tell him/her what the cost has been to your relationship, but also what you would like to see your relationship become once he/she agrees to accept professional help.
- Finally, let the person know that things cannot continue as they have in the past. Let him/her know that if he/she makes the decision to get professional help that you are willing to support and stand by him/her but if the choice is to continue down the path to oblivion, that you cannot for your own sake and well-being continue to enable his/her self destruction. Ask him/her to make the decision to accept the professional help that has been arranged.

The Intervention Rehearsal

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.

Determining Intervention Strategies. Establishing Contingency Plans and Boundaries.

During the intervention rehearsal, certain 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? The interventionist will discuss these questions and others during the intervention rehearsal. Rest assured, every imaginable excuse not to enter treatment has been heard before, and successfully dealt with, by an experienced interventionist. It is absolutely essential, however, for the group to remain focused and united.

In many situations, the alcoholic or addict has been enabled to continue a destructive lifestyle by family members, spouses, employers and friends. Sometimes this is referred to as codependency. Unfortunately, we can sometimes literally enable someone to death. By allowing destructive behavior to continue, we help no one. Not the person we care about and certainly not ourselves. We may have grappled with the difficult question of why we continue stand by and allow problems to continue and even worsen. There is any number of reasons. However, enabling must stop now if the intervention is to be successful. Alcoholism and addiction are powerful and the individual is firmly in its grasp. If we continue to enable nothing is likely to change. We must set healthy boundaries for our own sake or we will emotionally perish, too.

Selecting the Site for the Intervention, Date and Time.

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.

Making Arrangements with the Treatment Facility.

Since the goal of an intervention is to get the person to accept professional help in the form of a treatment program immediately following the intervention, 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. The interventionist may be able to contact treatment facilities and to refer the families based upon his experience. A tour of the facility by family members is a good idea so that when the individual wants to know just what this particular treatment facility is like, the family members can let them know that they have seen the facility, met the staff and made all necessary arrangements.

Unfortunately, in the world of managed healthcare, 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 guaranty 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.

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.

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 usually not advisable for the person to return home to pack for an obvious reason; they may change his/her mind. However, the dignity of the individual must be respected at all times. Even when the person makes the decision to immediately enter a treatment facility, it may be necessary to deal with some real but unexpected or unknown last minute issues or circumstances. Each situation is a bit different. However, the most ideal situation is for the individual to proceed with a family members and/or friends directly from the intervention to the treatment facility.

Sample Letter

Dear Dad,

Before I begin to say anything, I want you to know that I love you. I'm here today not only because I love you, but also because I'm very concerned about you. I'm concerned about what I have seen happen to you as direct result of your drinking. What I'm asking now is for you to listen to me. Listen carefully to what I'm going to say. It may be painful to hear but it is from the bottom of my heart.

When I was a boy we used to hunt and fish together. We used to play golf. Sometimes we would just get in your car and ride for hours going nowhere in particular, just enjoying our time together and stopping for a soda or for you to reminisce about some of your old escapades and stomping grounds. I've heard your stories so many times that I have most of them memorized but I've always enjoyed hearing them. I miss hearing them, Dad. I haven't heard any of your stories in a long time. Mike (my brother) and I feel like our Dad is gone. You're here physically but you're gone. I miss you and I want my Dad back.

Dad, I have become convinced that you can't stop drinking on your own. I see what a tremendous toll drinking has taken on you and on our relationship and on our whole family. I honestly don't think you can stop drinking on your own. I think you need help and we have arranged professional help for you. What I'm asking for you to do today is to make the decision to accept the help we are offering you.

Last week I was in your garage looking for some jumper cables because Mom's battery was dead in her car. The battery was dead because you had passed out in the car and left the lights on when you came home. You couldn't even get out of the car and into the house. You slept in the car in the garage. Mom found an empty bottle of vodka on the floor of her car. There is a strong odor of urine in the car because you had wet your pants and the seat of the car was soaked in urine. When I was looking for the jumper cables I found three bottles hidden in the garage.

On New Year's Day I came over with my wife and kids to have dinner and watch ballgames, like we've always done. You were drunk when we got here at noon. You didn't even speak to your grandchildren after getting their names mixed up. You couldn't even keep your grandchildren's names straight, Dad. Mom tried to make excuses telling us that you weren't feeling well but the smell of alcohol and the way you stumbled gave you away. You were drunk again.

Jay said he's afraid of you, Dad. He doesn't want to come over to your house anymore. And he doesn't want you coming to any of his ballgames, either. You were screaming obscenities at his coach after he took Jay out of the game. Jay heard what you were yelling and he was ashamed. He knew you were drunk again. I asked him to come over here today and be a part of this, but he said he doesn't care anymore. He just wants you to stay away from him. Dad, Jay is your first grandson.

We're all scared, Dad. We see what alcohol is doing to you and to Mom. It's killing you and it's killing your marriage and our family. None of us can go on like this anymore and we're tired of denying it any longer. We all got together last month and decided to try and get some help for you. We talked to his man right here who said if you are an alcoholic it's good news. It's good news because alcoholism can be treated and many people recover from the disease. We don't think you're a bad Dad, but we think you need help. He recommended a treatment center and we went there and talked with them and they said you could come there for help today. Please, Dad, I'm asking you decide to get help and accept the help we've arranged. I promise while you're gone I'll take care of Mom, your garden and the horses. And we'll all come there and visit you.

I want you to go because I want our family to be like it used to be. I want your grandkids to know you like I knew you when I was growing up. I want you to take my kids and go driving them into town for sodas and to tell them all the stories you used to tell me. But, Dad, I have to draw the line. This can't continue any longer. I have to protect my kids. If you're willing to get help we'll all be there for you. If you won't get help we're not coming over anymore and we don't want you coming over anymore, either. Joy and I have talked and prayed about it. We can't let our kids be around you when you're drunk, and you're drunk almost all the time. I know this will be very hard on Mom but we've had to make our decision. Now, Dad, will you make your decision to accept help? Your drinking doesn't have to go on any longer, but it is your choice. We love you and we want you back.

Steve.