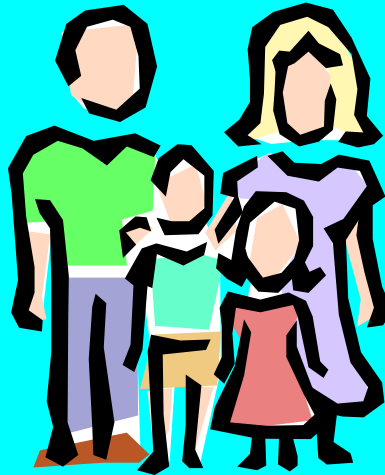


FAMILY INTERVENTION



Years ago I used to commiserate with all people who suffered.

Now I commiserate only with those who suffer in ignorance,
who do not understand the purpose and ultimate utility of pain.

~ **Bill Wilson**, *As Bill Sees It*.



The Problem

- 90% of those with the disease of addiction never receive treatment
- 70% of the population is has a family member or friend who needs treatment

These other victims

- Have an array of social services to help them with the consequences of their loved one's addiction
- Have Al-Anon – to help themselves
- Have counseling -- to help themselves

- But don't have an answer to their most frequently asked question:

How do I get him to stop?

Can't get the answer because

- Public funding goes towards primary prevention and tertiary prevention (TX)
- Very little goes to secondary prevention, and virtually all goes towards adolescents
- Insurance companies are useless
- TX community naturally focuses on TX

They are told

- You can't help him until he's ready
- She has to hit bottom first
- Pushing him to get help will just make it worse
- You can lead a horse to water.....
- He has to want help

There are two problems with these answers.

1. They condemn those with the disease and their families to continued misery

2. It is simply not true

Do we say such things about
other diseases?

No, we would use everything possible
to save a life of someone we love.

Why do we do it with this disease?

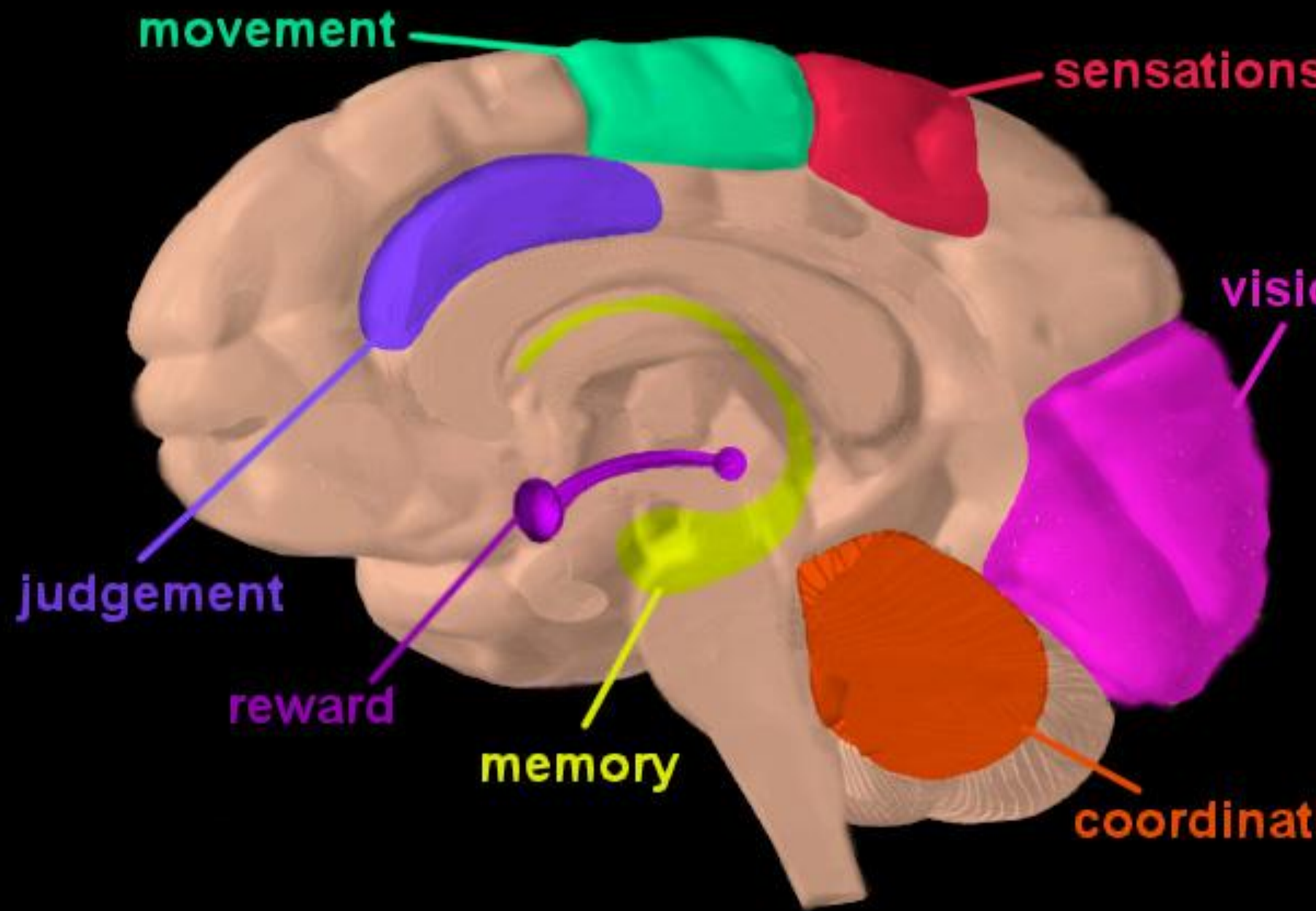
- People focus on the behavior (consequences) of the disease rather than the disease itself
- Don't really believe the disease concept, in spite of what they might say
- Addicts are a pain in the ass, and we judge them by how they make us feel

- Or is it because
down deep we
really don't think
it's a disease....

So...Is It

- A disease
- or
- Kinda sorta like a disease?

- Better get this clear or you will be miserable dealing with addicts!



The science is clear...

- It is a disease,
but one that tells
you that you are
not sick!

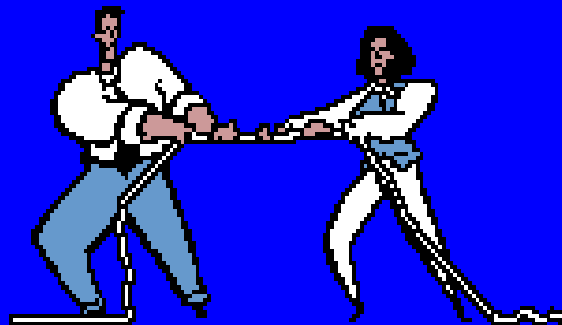
**Can you help
someone
who doesn't want
help?**



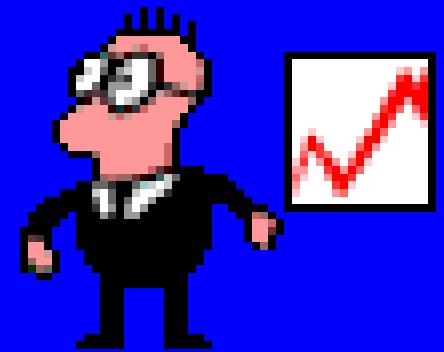
YES !



Patients don't have to
“hit bottom”, admit that he/she
needs help, think it's a good
idea, or even want to enter
treatment in order
for it to be effective.



Recovery rates in
treatment centers are the
same regardless of why
the patient enters!



- Proven by repeated studies
- Confirmed by recent experience of Drug Courts and Prop 36

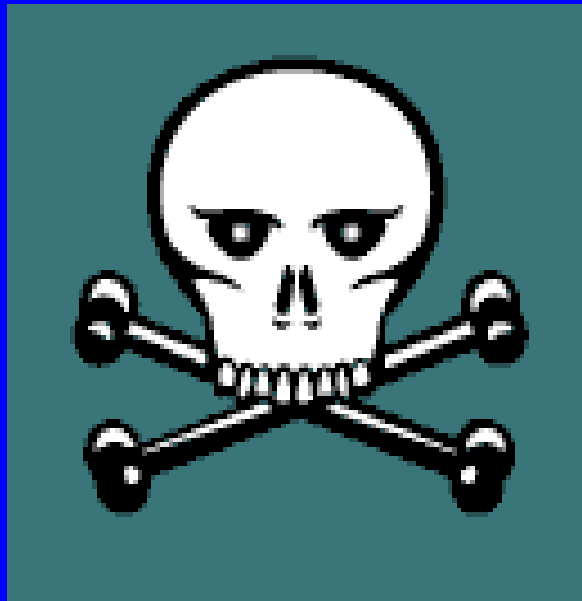




- Anything we do in an ethical way to get people into treatment is a good thing.



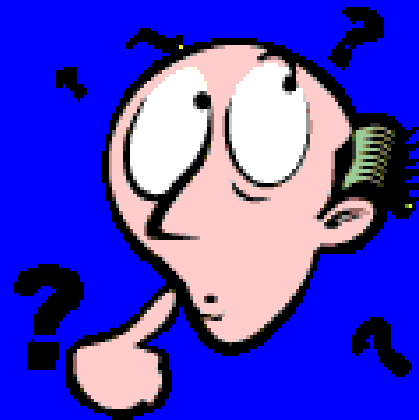
The Problem:



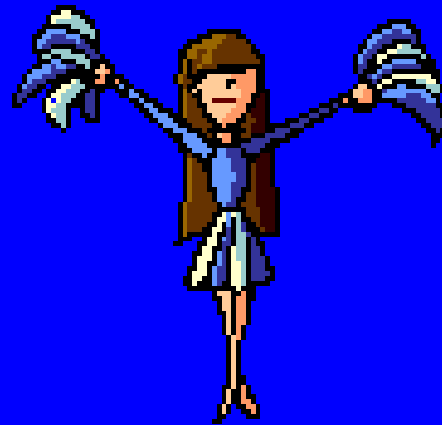
90%
of
alcoholics/addicts
die before ever
getting treatment



**What can we do to
reduce
this number?**



Intervention



In the helping professions “Intervention” is understood as

- **“A deliberate process by which change is introduced into peoples' thoughts, feelings and behaviors”**
- **This can range from putting up “Just Say No” posters to putting a cast on a broken arm**

In the addiction field “intervention” can refer to

- **Skills used by a counselor to persuade/ motivate a patient into modifying behavior or enter treatment**
- **Motivational Interviewing**
- **Actions used by an employer or the criminal justice system to benevolently coerce someone into treatment**

Or more commonly:

- **An organized effort led by a trained counselor that seeks to break through denial and get someone into treatment**
- **When a circle of family and friends is used in the process is commonly called a**

“Family Intervention”

Intervention preceded AA

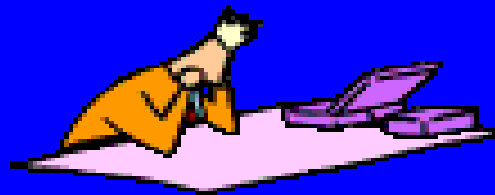
- In 1934 Roland H. and Cebra G. went to court and got a judge to release Ebby to their custody/Oxford group
- Ebby helped Bill Wilson
- Without intervention, AA might never have existed!

Intervention is compatible with 12 step programs

- When the DuPont company approached Bill Wilson to ask him how AA could help their employees, Bill told them that they would have to come up with a way. EAPs
- Bill encouraged families to leave AA literature around the house
- An “outside issue”

The Inspirations for Contemporary Intervention

- **Lyndon Johnson**



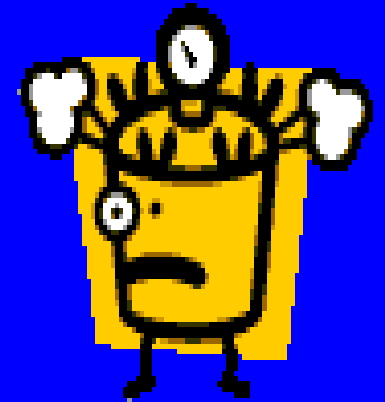
- **Vernon Johnson**

“If you lead a man
by his testicles his
heart and mind will
follow”



Lyndon Johnson

“Testicular Pressure” interventions



- Not the preferred model
- Can be as simple as working with the criminal justice system to offer treatment in lieu of jail, or requesting prison sentences include treatment
- Domestic violence / TROs / Divorce
- “Contract” interventions



Even in all these cases the family

- Usually initiates the process
- Is most helpful in assessments
- Has the needed logistical information

Preferred Model:

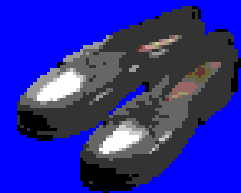
**The
Family
Intervention**



- Developed in the 1970s by Vernon Johnson, an Episcopal priest
- Frustrated that he was not successful at convincing alcoholics to get help
- Founder of the Johnson Institute, Minneapolis
- Studied alcoholics who entered treatment; realized that virtually all entered because of painful crisis
- What if we could take existing pain and present it to the addiction person in a loving, non-judgmental way and convince them to get help?

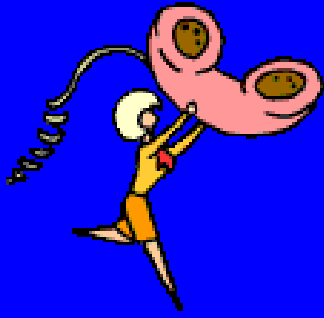
So who can present the pain?

- The other victims of addiction
- The ones with the most to gain and the most to lose
- The ones who can compete with the power of addiction
- The ones wearing the ruby slippers



Family Interventions

- The family is the agent of the intervention, not the counselor
- The counselor/interventionist is the trainer/coach
- For the counselor the client is the family, not the addict/alcoholic
- Critical that the counselor understand co-dependency and family dynamics & roles
- Typical families are a jumble of anger, resentment, blaming, and “doormatting”



The Process

- Usually begins with a call from a desperate family member who has “tried everything”
- Must do careful screening to make sure this is addiction --- a life and death issue --- not recreational use or situational abuse
- Goal with this call is to instill hope and get the key person to gather a family group



Next: What Kind of Intervention?

- Johnson Model no longer the automatic choice
- A majority of families won't follow through with a Johnson style
- Some counselors have a problem with it being too confrontational, inpatient oriented, and don't like the addict being left out of the process

So, the current, cutting edge approach:

- FICS / ARISE (A Relational Intervention Sequence for Engagement)

Garrett, Landau, Stanton, Shea

Rather than jump to the surprise party plan right away, above seeks to use the least amount of therapeutic and family energy.

FICS / ARISE, cont.

- Invite the family and the addict in for counseling; take the family if the addict refuses
- Look for easier ways (warrants, employer pressure, P.O. problems, etc.)
- Discussion options with family; be supportive, get them to buy into the process
- Use the Johnson confrontation as last resort

Getting Ready

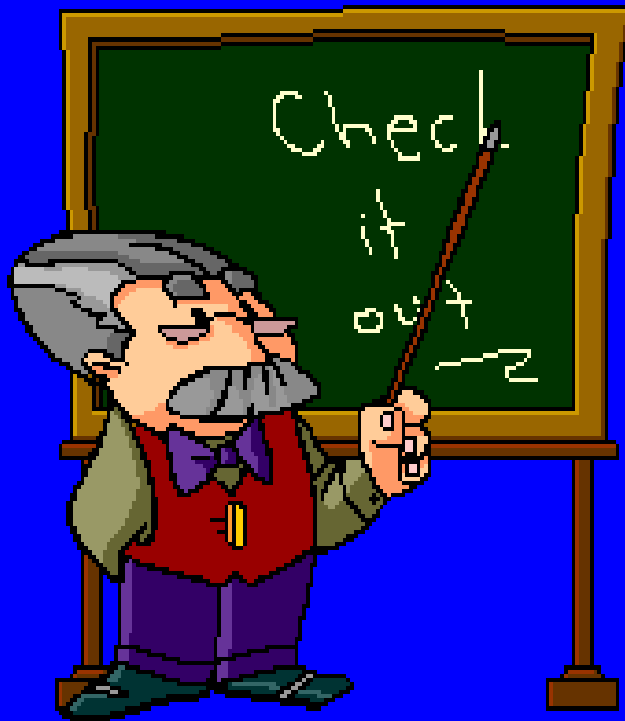
- **Education**
- ***Preparation***
AKA pre-intervention
- ***Dress Rehearsal***
& Intervention



Education

Johnson: 2 one hour classes

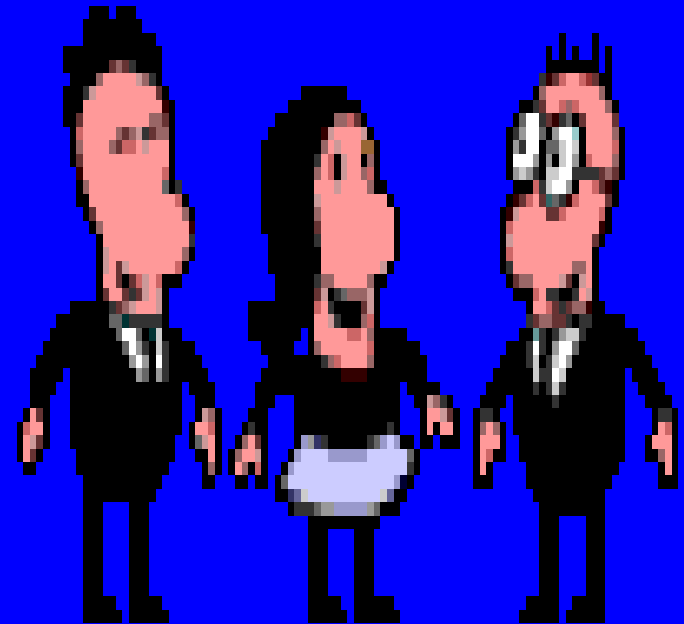
FICS: 1 three hour class



- Disease Concept
- Family disease concept
- Referral to Al-Anon, etc.
- Describe the intervention process
- Get them to buy into it
- Homework

Preparation pre-intervention

- Cohesive focused group; set aside other issues
- Reinforce the idea that they are NOT different
- Script Writing
- Several Meetings
- Practice Session
- Treatment Options



Who comes to class?

- a. key family organizer
- b. reluctant-skeptic (“There’s nothing we can do until he wants to change”)
- c. angry moralist (“Just divorce the s.o.b.”)
- d. denial (“Why are we here? I haven’t seen anything very bad”)
- e. protector (“I could never kick him out”)
- f. magic seekers (“If you go talk to him maybe he’ll accept help”)
- g. cookie persons, detached friends, relatives, co-workers

Dress Rehearsal & Intervention



- Final prep for the SWAT team
- Role play
- Test the room arrangement and order of readers
- Hand signals
- The “what if” part

The Intervention



- All arrive early
- Hide cars
- Have kleenex, props and suitcase ready
- Counselor meets addict outside the room if possible
- Get him in the car ASAP after the intervention
- Call the treatment center to verify coming

Why haven't I heard about interventions before?

- Hard to believe, since it is so successful
- Mis-represented in media
- No controls; some interventionists are complete Lone Rangers
- No insurance or public funding, so expensive



Why do Intervention?



- The alcoholism and drug abuse counselor should... act to guarantee that all persons, especially the needy and disadvantaged, have access to the necessary resources and services. The alcoholism and drug abuse counselor should adopt a personal and professional stance, which promotes the well being of all human beings.
- CAADAC Code of Ethics



So families need to hear, even when they call the wrong number

- I can't help you here, unless he calls.
- But there is a way you can help him
- Call the NCADD and get an interventionist

People at meetings

- AA, as such, should never, of course, endorse Charle St, but we sure hope that individual AAs send people there
- Al-Anon, as such, ought never endorse intervention, but individuals should not talk about intervention, or at least not downplay it.