

**Seven Steps to An Alcohol or Drug  
Intervention on Your Adult Loved One  
By Peggy L. Ferguson, Ph.D.**

1. First, live your life. Change your focus from them to you. Take care of yourself. Quit enabling them, or running around after them picking up their messes. Don't believe the unbelievable. But don't argue about it. Don't engage in a struggle with them over the chemical. Let them come face to face with their own struggle over the chemical.
2. Do your homework. Find a treatment program that you or they can afford. Check it out. Call them. Visit them. Ask questions about various conditions that your loved one may have. Find the one that is a right fit for your family member. Don't wait until the day before the intervention to start looking for a treatment program. It's not that simple to find an appropriate treatment program any more. Find out how long it usually takes to get a bed once you are ready. Find out if you need to be on a waiting list. If so, put your loved on it, if they will let you.
3. Round up your intervention team. Call the people that won't tip them off and tell them that you are planning an intervention to be conducted when a crisis happens, unless they deteriorate to a point where they should go to treatment immediately. Talk with this group of people about the effects of the addict's illness on their lives. Talk about it until you are all on the same page. Talk about not enabling or rescuing them from consequences so that the addict will experience those consequences and thus be motivated to go to treatment. Talk about being willing to risk the addict being angry with them to help the addict live. Talk about the importance of letting the addict stay in treatment once you get them there, regardless of what they say about wanting to come home. Have them write out a list of things they will say to the addict about how his/her behavior effects them. Then be patient. It may take awhile before the addict is able to make the connection between their drinking/using and the negative consequences.
4. Wait until the addict experience a crisis. Crises happen routinely when you have addiction. A crisis can be precipitated by your loved ones stopping their enabling. It could be a DUI. It could be a romantic breakup over the chemical or the loss of a marriage. It could be the loss of a job. It could be scary medical news. Of course, the addict being in imminent danger of dying, or deteriorating to the point that it is obviously the time for treatment, is a crisis. Anytime that someone you love is suicidal, that is the time to intervene. Don't wait until they attempt. Chicken soup and emotional support is not appropriate treatment for suicide ideation or gestures. Get help.
5. When a crisis happens, take action. Pack their bags. Call the treatment center and get a bed arranged. Ask the treatment center what a patient needs to bring with them. You could also have a bed arranged at two different treatment centers if you think that they may object to the one you have chosen. Sometimes giving them a choice between treatment centers positively influences the choice to go to treatment.
6. Call the group together to intervene. Don't wait. If members of the team are unable to

be there, do it without them. Timing is crucial. Have each member tell the addict about the impact of the chemical abuse on each person's life. Don't use dirty fight tactics. Keep it simple. Make it matter of fact. Don't argue with them when they don't agree. Stay on topic. Don't get derailed by defenses. Make a connection between the current crisis and the addiction. And speak specifically about events that you hurt you personally. They don't have to be recent events. Use statements like these:

"When I get a phone call in the middle of the night from the police station about your drunk driving, I feel scared, angry, and ashamed."

"When you come home drunk and start complaining about my cooking and the way the house looks, I feel hurt, sad, and angry".

"When I was in the hospital giving birth to our son, you were out drinking and using. When that happened I felt hopeless, abandoned, and hurt".

"When you \_\_\_\_\_, I feel \_\_\_\_\_".

"I want you to go to treatment today. Your bags are packed. You have a bed reserved at \_\_\_\_\_".

Declare your "bottom line" (see my article, Boundaries, Bottom lines, and Threats: Knowing the Difference Can Empower Family Member Recovery on [ezinearticles.com](http://ezinearticles.com)). Don't make threats, but be firm in what you are willing and not willing to do, to keep from watching your loved destroy his/her own life. Use statements like these:

"I am no longer willing to keep paying for classes at the university that you end up dropping in the last half. As you as you are still drinking/using, you are on your own for college tuition and expenses".

"You cannot live with me and continue to drink/use. You must move out if you choose to continue".

7. When they agree to go to treatment, take them immediately. Addicts that promise that they will go next week, or tomorrow, have a much lower likelihood of actually going to treatment. There will be a lot of excuses and "reasons" why they can't go to treatment, and why they can't go now. Challenge each excuse that comes up, with options, or with pointing out that [whatever it is], is not as important as your loved one's life. Once they get to the treatment center. Leave them there and don't go back to pick them up until the clinical staff says that they are ready to leave.

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