INTERVENTION CAN SAVE AN ALCOHOLIC’S LIFE

People used to believe that alcoholics had the ability to control their drinking, but they just weren’t willing to do so. Now we know that alcoholism is a progressive neurological disease strongly influenced by genetic vulnerability. We also know that willpower is as powerless to alter the neurochemical changes in alcoholics as it is to stabilize blood sugar fluctuations in diabetics.

Concerned family members and friends of an alcoholic can help the alcoholic by learning about the disease of alcoholism and the symptoms associated with its early, middle, and late stages. Once the alcoholic’s family and friends understand the true nature of the disease, they are able to see that the addiction – not the alcoholic – is the true enemy. They can then help the alcoholic fight the disease of alcoholism. One way to help the alcoholic accept treatment is to use a technique called intervention.

TYPES OF INTERVENTIONS

Intervention is a technique designed to “bring the bottom up” before alcohol destroys everything of value in the alcoholic’s life. The approaches vary, but the general concept is to persuade the alcoholic to get treatment. In treatment, the alcoholic’s denial – a primary symptom of the disease – can be broken down by letting the alcoholic know that he or she is loved and that friends and family members are concerned about his or her behavior.

An informal intervention is one in which physicians, friends, and colleagues individually offer their concern and support to the alcoholic. Over the years, brief informal interventions can sometimes make a difference, but not all alcoholics will respond to this approach. If the disease has progressed too far, an informal intervention may not be able to penetrate the alcoholic’s highly developed defense systems.

A crisis intervention is more immediate and forceful. When a crisis occurs, the event can be used to persuade the alcoholic to get help. Examples of crisis situations related to alcoholism include hospitalization caused by intoxication, a drunk-driving charge, a potentially violent child custody situation, or a suicide attempt. The crisis intervention focuses attention on the underlying cause of the emergency – neurological addiction to the drug alcohol – and then directs the alcoholic into alcohol treatment.

A formal intervention generally involves several weeks of planning and preparation. The first step is to find a counselor who will guide the family members through the intervention and treatment process. The process is likely to include a meeting with the alcoholic; inpatient or outpatient treatment; participation in 12-step programs; and regular sessions with an addictionologist, clinical psychologist, or certified alcohol and drug counselor who understands the neurophysiological nature of the disease. The counselor can also assist with making all the arrangements necessary to carry through with the plan. In addition, the counselor can educate the participants about the disease process, encourage them to build up a support system, and act as a clearinghouse for community resources that help families cope with alcohol-related problems.
EFFECTIVE APPROACHES

The process of helping an alcoholic to help himself or herself often includes a face-to-face meeting in which family members, friends, and concerned others confront the alcoholic with specific facts pointing to the devastating impact of alcohol on the alcoholic’s life. Here are the essential elements involved in this type of meeting:

- The facts and data must be presented by people who are close to the alcoholic or exert a powerful influence on the alcoholic’s life. Examples include family members, friends, bosses, supervisors, co-workers, physicians, and clergy members.

- Specific firsthand evidence is especially convincing. The most powerful evidence describes events that have happened or conditions that exist. Use “I” statements, rather than opinions, generalizations, or accusations. For example, “I was really sad when you were late for my birthday party because you had been out drinking with friends.”

- Everyone involved in the intervention should avoid moral judgments and any tone of censure. All the facts presented should be used to support the reasons that the family members and friends are concerned. Here is an example: “Jane, three weeks ago this Saturday you insisted on driving Alison and her friend to a slumber party. You had been drinking wine all afternoon. I tried to take your keys away, but you got very upset, yelled at the kids to get in the car, and drove off. I waited in agony for you to come home, scared to death that you would all be killed in a car wreck. I know how much you love your children and how devastated you would be if anything happened to them. I want you to get well. We all want you to be healthy again.”

- Whenever possible, the facts should center around the use of alcohol. Highlighting the contradictions or conflicts in values caused by drinking can make the point even stronger. Here is an example: “I’ve seen how your personality changes when you drink, and it scares me. I know you are not a violent person when you’re sober, but last Wednesday, I commented on your drinking, and you slapped me several times. I was shocked and hurt. I still have the bruises on my face. I love the person you are when you’re not drinking. Please get help.”

- Vivid details are particularly effective because they give the alcoholic a wide-screen view of his or her behavior at a particular point in time. Videotapes and home movies that show the alcoholic drinking or intoxicated are very convincing because they leave no room for denial.

- Arrangements for assessment and treatment should be made in advance by the professional counselor who assists you, so that if the alcoholic agrees to accept help, the process can begin immediately.

Conducting one or two rehearsals or practice sessions can help the discussions go much more smoothly. When family and friends are properly educated and the facts are carefully gathered and lovingly presented, this approach can be extremely effective.

RESOURCES

Whether intervention consists of the informal act of telling an alcoholic that you care about him or her and are concerned about his or her drinking, or the formal act of family, friends, and treatment professionals meeting with the alcoholic to outline their concerns and present a step-by-step course of action, the goal should always be to give a gentle but firm push toward accepting help.

If you are concerned about the drinking of someone you know, call one of the attorney counselors at the Oregon Attorney Assistance Program. They can help with arranging an intervention, discussing treatment options, and guiding you to other resources.

Katherine Ketcham and William F. Asbury

This article has been excerpted and adapted with permission from Chapter 9 of Beyond the Influence: Understanding and Defeating Alcoholism, by Katherine Ketcham and William F. Asbury (Bantam Books, 2000). Ms.
Ketcham is also the author of Teens Under the Influence: The Truth About Kids, Alcohol, and Other Drugs – How to Recognize the Problem and What to Do About It (Ballantine Books, 2003).