



Diseases and Conditions

Mental illness

An intervention can motivate someone to seek help for alcoholism, drug abuse, eating disorders or other addictive behaviors. Discover when to hold one and how to make it successful.

By [Mayo Clinic Staff](#)

It can be challenging to help a loved one struggling with alcoholism, drug problems, an eating disorder or other destructive behavior. Sometimes a direct, heart-to-heart conversation can start the road to recovery. But when it comes to addiction, a more focused approach is often needed. You may need to join forces with others and take action through a formal intervention.

People who struggle with addictive behaviors are often in denial about their situation or are unwilling to seek treatment. Often they don't recognize the negative effects their behavior has on themselves and others. An intervention presents your loved one a structured opportunity to make changes before things get even worse.

An intervention is a carefully planned process involving family and friends and sometimes colleagues, clergy members or others who care about a person struggling with addiction. During the intervention, these people gather together to confront the person about the consequences of addiction and ask him or her to accept treatment. The intervention:

- Provides specific examples of destructive behaviors and their impact on the addicted person and loved ones
- Offers a prearranged treatment plan with clear steps, goals and guidelines
- Spells out what each person will do if a loved one refuses to accept treatment

An intervention can help people who struggle with addictive behaviors but who are in denial about their situation or who have been unwilling to accept treatment. Some examples of behaviors that may warrant an intervention include:

- Alcoholism
- Prescription drug abuse
- Abuse of street drugs
- Eating disorders
- Compulsive gambling

People with addiction often don't see the negative effects their behavior has on them and others. It's important not to wait until they "want help." Instead, think of an intervention as giving your loved one a clear opportunity to make changes before things get really bad.

An intervention usually includes the following steps:

1. **Planning.** A family member or friend proposes an intervention and forms a planning group. It's best if you consult with an intervention professional (interventionist), a qualified professional counselor or a social worker when planning an intervention. An intervention is a highly charged situation and has the potential to cause anger, resentment or a sense of betrayal. If you have any concerns that the intervention may trigger anger or violent behavior, consult an intervention professional before taking any action.
2. **Gathering information.** The group members find out about the extent of the loved one's problem and research the condition and treatment programs. The group may make arrangements to enroll the loved one in a specific treatment program.
3. **Forming the intervention team.** The planning group forms a team that will personally participate in the intervention. Team members set a date and location and work together to present a consistent, rehearsed message and a structured treatment plan. Do not let your loved one know what you are doing until the day of the intervention.
4. **Deciding on specific consequences.** If your loved one doesn't accept treatment, each person on the team needs to decide what action he or she will take. Examples include asking your loved one to move out or taking away contact with children.
5. **Writing down what to say.** Each member of the intervention team should detail specific incidents where the addiction has resulted in problems, such as emotional or financial issues. Discuss the toll of your loved one's behavior while still expressing care and the expectation that your loved one can change.
6. **The intervention meeting.** Without revealing the reason, the loved one is asked to the intervention site. Members of the core team then take turns expressing their concerns and feelings. The loved one is presented with a treatment option and asked to accept that option on the spot. Each team member will say what specific changes they will make if the addicted person doesn't accept the plan.

- 7. Follow-up.** Involving a spouse, family members or others is critical in helping someone with an addiction stay in treatment and avoid relapsing. This can include changing patterns of everyday living to make it easier to avoid destructive behavior, offering to participate in counseling with your loved one, seeking your own therapist and recovery support, and knowing what to do if relapse occurs.

A successful intervention must be planned carefully to work as intended. A poorly planned intervention can worsen the situation — your loved one may feel attacked and become isolated or more resistant to treatment.

Consulting an intervention professional (interventionist), an addiction specialist, psychologist or mental health counselor can help you organize an effective intervention. It may be a good idea to have the intervention professional attend the actual intervention to help keep things on track.

It's a good idea to get professional help if your loved one:

- Has a history of serious mental illness
- Has a history of violence
- Has had suicidal behavior or recently talked about suicide
- May be taking several mood-altering substances
- Is in denial, likely to become angry or tends to minimize his or her situation

It's especially important to consult an intervention professional if you suspect your loved one may react violently or self-destructively.

An intervention team usually includes four to six people who are important in the life of your loved one. They could be people your family member or friend loves, respects, admires, depends on and likes, and may include relatives, friends, and community leaders such as clergy members or teachers. Don't include anyone who your loved one dislikes, anyone who has an unmanaged mental health issue or substance abuse problem, or anyone who might sabotage the intervention. This includes anyone who may not be able to limit what he or she says to what you agreed on during the planning meeting.

If you think it's important to have someone involved but worry that it may create a problem during the intervention, consider having that person write a short letter that someone else can read at the intervention.

Depending on the severity of your loved one's behavior or condition, it may be appropriate to ask him or her to seek support from a group such as Alcoholics Anonymous. A more severe problem may require admittance into a structured program or hospital.

If a treatment program is necessary, it may help to make arrangements in advance for admittance. Do some research, keeping these considerations in mind:

- **Ask a trusted addiction specialist, doctor or mental health provider** about the best treatment approach for your loved one and recommendations about programs.
- **Contact national organizations, online support groups or local clinics** for treatment programs or advice.
- **Find out if insurance will cover the treatment program** you're considering.
- **Find out what steps are required for admission**, such as an evaluation appointment, insurance pre-certification and whether there's a waiting list.
- **Be wary of treatment centers promising quick fixes.** Avoid programs that use uncommon methods or treatments that seem potentially harmful.
- **If the program requires travel, make arrangements ahead of time.** Consider having a packed suitcase ready for your loved one.

Keep in mind, your loved one's problem involves intense emotions. The process of organizing the intervention and the intervention itself can cause conflict, anger and resentment even among family and friends who know a loved one needs their help. To help run a successful intervention:

- **Consult an intervention specialist.** It's possible to conduct an intervention without an intervention specialist, but having expert help is preferable. An intervention professional will take into account your loved one's particular circumstances, suggest the best approach and help guide you in what type of treatment and follow-up plan is likely to work best.
- **Don't hold an intervention on the spur of the moment.** It can take several weeks to plan an effective intervention. However, don't make it too elaborate, either, or it may be difficult to get everyone to follow through.
- **Plan the time of the intervention.** Make sure you choose a date and time when the addicted person is least likely to be under the influence of alcohol or drugs.
- **Do your homework.** Research your loved one's addiction or substance abuse issue so that you have a good understanding about what's going on.
- **Appoint a single person to act as a liaison.** Having one point of contact for all team members will help you communicate and stay on track.
- **Share information.** Make sure each team member has the same information about your loved one's addiction and the intervention so that everyone is on the same page. Hold meetings or conference calls to share updates.

- **Stage a rehearsal intervention.** Here, you can decide who will speak when, sitting arrangements and other details so that there's no fumbling during the real intervention with your loved one.
- **Anticipate your loved one's objections.** Have calm, rational responses prepared for each reason the addicted person may give to avoid treatment or responsibility for his or her behavior. Offer support to your loved one that makes it easier to engage in treatment, such as arranging child care or attending counseling sessions with him or her.
- **Avoid confrontation.** Be honest, but don't use the intervention as a forum for hostile attacks. Avoid name-calling and angry or accusing statements.
- **Stay on track during the intervention.** Veering from the plan can quickly derail an intervention and has the potential to make the situation worse.
- **Ask for an immediate decision.** Don't give your loved one time to think about whether to accept the treatment offer, even if he or she asks for a few days to think it over. Doing so just allows your loved one to continue denying a problem, go into hiding or go on a dangerous binge. Be prepared to get your loved one into an evaluation to start the treatment immediately if he or she agrees to the plan.

Unfortunately, not all interventions are successful. In some cases, a loved one may refuse the treatment plan. The addicted person may erupt in anger or insist that he or she doesn't need help or may be resentful and accuse you of betrayal or being a hypocrite.

Emotionally prepare yourself for these situations while remaining hopeful for positive change. If your loved one doesn't accept treatment, be prepared to follow through with the changes you presented.

Oftentimes, children, partners, siblings and parents are subjected to abuse, violence, threats and emotional upheaval because of alcohol and drug problems. You don't have control over an addicted person's behavior. However, you do have the ability to remove yourself — and any children — from a destructive situation.

Even if an intervention doesn't work, you and others involved in your loved one's life can make changes that may help. Ask other people involved to avoid enabling the destructive cycle of behavior and take active steps to encourage positive change.

References

1. Copello AG, et al. Family interventions in the treatment of alcohol and drug problems. *Drug and Alcohol Review*. 2005;24:369.
2. Intervention eBook. Partnership for a Drug-Free America. <http://www.drugfree.org/intervene>. Accessed May 9, 2011.

3. Intervention guide. Recovery Connection. <http://www.recoveryconnection.org/intervention-guide/InterventionGuide.pdf>. Accessed May 9, 2011.

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Original article: <http://www.mayoclinic.org/diseases-conditions/mental-illness/in-depth/intervention/art-20047451>

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