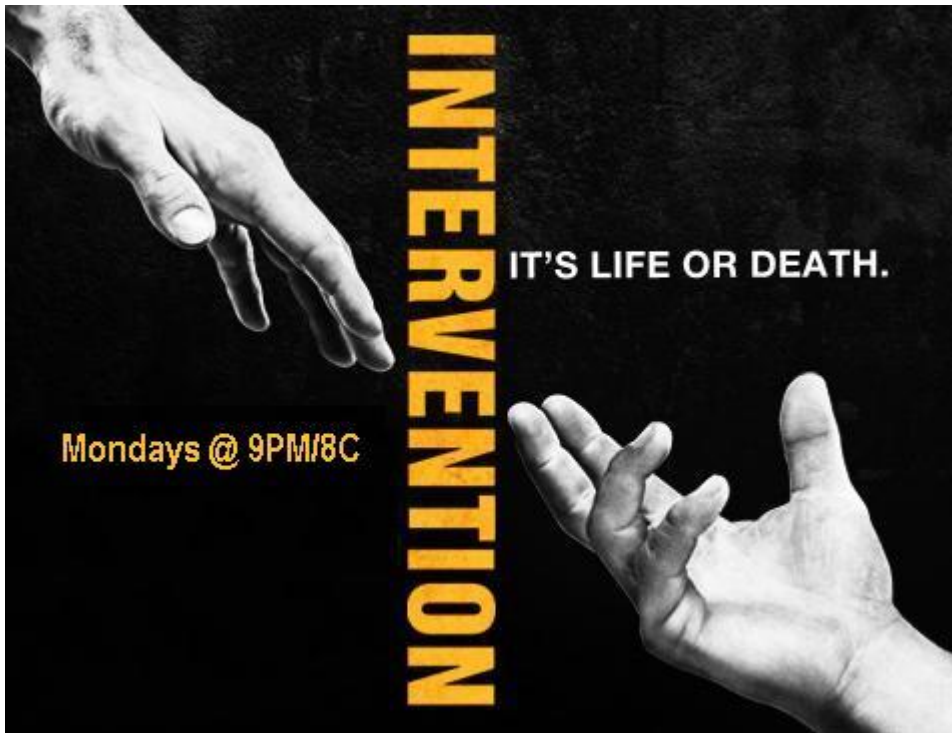


Addiction & the Humanities Vol. 6(7) - The Force of Intervention

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Ethically, healthcare professionals are bound to respect participants' addiction treatment-seeking decisions, and therefore cannot force treatment onto unwilling participants unless they represent a threat to themselves or others. But, what would happen if such a restriction did not exist? A previous Humanities review (Vol 5-8) of A&E's "The Cleaner" revealed the inaccuracies in the show's depiction of addiction recovery following an intervention. Similarly, this week's *Addiction & the Humanities* examines another A&E show related to addiction recovery, "Intervention." Within the context of the show, we discuss the efficacy and ethical ramifications of intervention as an attempt to change the substance using patterns of a loved one.

Initially, family members and close friends nominate a candidate for "Intervention" based on his/her risky substance use or addiction-related behavior. The "Intervention" team then invites the candidate to contribute to a documentary series on addiction through a series of interviews. The invitation, in part, is a ruse. The true intention of "Intervention" is to force the candidate into treatment. The candidates, who agree to contribute, do not know that the "Intervention" team trains members of the candidate's family about intervention tactics while searching for an ideal rehabilitation clinic for the candidate to undergo a 90-day treatment. The show content primarily consists of interviews of the candidate and family members, who share their perspectives on the effects of addiction. In each episode, the interventionist typically explains to the family how their own inaction translates into an acceptance of the candidate's addiction. At the end of the show, the family conducts the surprise intervention, and television cameras capture the candidate's response in real time. In most cases, the candidate agrees to treatment after the intervention.



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If the episode “Amber” is representative of “Intervention”, it suggests that intervention indeed coerces candidates’ decision to agree to rehabilitation. For example, Amber’s father tells her that she can no longer live in his house if she refuses rehabilitation, while her ex-husband promises to seek sole custody of their daughter if her addiction continues. Facing these threats, Amber seems to have no choice other than to accept treatment, including the condition that her family attends a family clinic with her. Two months into treatment, Amber admits that she is having trouble with recovery and that she is disappointed that her family has not attended the family clinic. The show claims that Amber is sober today, but again, the program does not report its follow-up methods.

Amber’s case illustrates the coercive tactics that are characteristic of interventions. Her initial response to confrontation is to leave the intervention and escape the clutches of her family. Eventually she submits to social pressure and undergoes treatment. This separation between personal motivation and rehabilitation entry is a distinct flaw of “Intervention.” For example, several studies have suggested the importance of the association between internal desire to reduce or change addictive behavior and long-term recovery (Shaffer 1992; Laudet, Magura, Vogel, & Knight, 2003; Laudet & White, 2008).

“Intervention” also extends ethical boundaries: the candidate is approached only when family members submit a nomination, when the candidate is subjectively

deemed to be “at a point of personal crisis and estranged from their friends and loved ones” (<http://www.aetv.com/intervention/about/>). The candidate remains unaware of the selection process and the true intentions of the show until the family members conduct the intervention, thereby raising ethical questions regarding these methods of treatment introduction.

“Intervention” claims that 71% of the candidates who have appeared on the show and entered a rehabilitation clinic have remained sober. Strangely, it cites 131/161 as the exact number of sober candidates, which actually represents a sober rate of 81%. The Division on Addictions attempted to contact Candy Finnigan, one of the show’s interventionists, to determine how follow-up interviews were structured and to explore this statistical discrepancy, but she has not responded.

Dramatic portrayals of addiction recovery remain surprisingly popular. One possible appeal of shows such as “Intervention” could be the drama of forcing candidates into treatment against their will. This formula essentially simplifies the complexities of addiction and the recovery process. However, such a portrayal can be detrimental to a more comprehensive and accurate understanding of addiction. Regardless of the results of this television show, as a technique, intervention remains a coercive method of persuasion. Considering that the follow-up methods of “Intervention” are presently unknown, the purported rate of recovery seems exceedingly, if not mistakenly high - particularly compared to the rates of relapse and recovery established by treatment outcome research. Furthermore, there is little research focusing on the efficacy and adverse consequences associated with interventions. Consequently, it is premature to consider intervention as an effective treatment, despite shows’ claims; perhaps just as important, there are important questions about intervention as an ethical component of treatment. Alternatively, motivational enhancement techniques may likely result in more successful recoveries with fewer negative effects. These new resistance reduction approaches (Shaffer, 2001) can diminish the need for “interventions” as portrayed on television.

-Aaron Lim

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References

Intervention: About the show. Retrieved from <http://www.aetv.com/intervention/about/>

Johnson, V. E. (1980). *I'll quit tomorrow* (Revised ed.). New York: Harper & Row.

Johnson, V. E. (1986). *Intervention: How to help someone who doesn't want help*. Minneapolis: Johnson Institute Books.

Laudet, A. B., Magura, S., Vogel, H. S., & Knight, E. L. (2003). Participation in 12-Step-Based Fellowships Among Dually-Diagnosed Persons. *Alcohol Treat Q*, 21(3), 19-39.

Laudet, A. B., & White, W. L. (2008). Recovery capital as prospective predictor of sustained recovery, life satisfaction, and stress among former poly-substance users. *Subst Use Misuse*, 43(1), 27-54.

Shaffer, H. J. (1992). The psychology of stage change: The transition from addiction to recovery. In J. H. Lowinson, P. Ruiz, R. B. Millman & J. G. Langrod (Eds.), *Substance abuse: a comprehensive textbook* (Second ed., pp. 100-105). Baltimore: Williams & Wilkins.

Shaffer, H. J., & Simoneau, G. (2001). Reducing resistance and denial by exercising ambivalence during the treatment of addiction. *Journal of Substance Abuse Treatment*, 20(1), 99-105.

Vargas-Cooper, N. (2010). The rehab show that works. *The Daily Beast*. Retrieved from <http://www.thedailybeast.com/blogs-and-stories/2010-07-21/the-new-ae-reality-show-intervention-with-jeff-vanvonderen-and-candy-finnigan/>.