A FREE RESOURCE FOR FRIENDS AND FAMILY

This guide will help you plan and conduct an intervention for a loved one struggling with drugs or alcohol. It covers: selecting the right type of intervention to have, choosing the right people to be involved, handling objections, writing effective “intervention letters,” finding a quality treatment center, and much more.
About This Guide

If someone you care about is struggling with a drug or alcohol problem, an intervention can be a turning point, a realization there is a serious problem that requires professional help. You can conduct an intervention on your own. Alternatively, there are professional interventionists that can assist you on a fee-for-service basis. If you are concerned enough about a loved one to be reading this, you should seriously consider taking action. The worst thing you can do is stand by and do nothing. Someone with an addiction is often surrounded by people who want him or her to get better. This can include:

- Parents and family members
- Spouses
- Friends, family friends
- Employers and co-workers
- Physicians, therapists, and counselors
- Coaches, guidance counselors, mentors, or teachers
- Spiritual or religious advisors

It is important that you and all individuals involved with the intervention read this guide thoroughly and seek professional help when necessary. Substance abuse can have tragic consequences, and an intervention can help save someone’s life. Please plan and prepare accordingly.
What Is an Intervention?

An intervention is a serious, well-thought-out conversation with someone expressing concern over his or her drug or alcohol use. It should be supportive and caring, free of anger or blame, and held to let the person know you are there to help.

Interventions can be a one-on-one conversation, but are dramatically more successful if several people are involved. Ideally, a group of people that the individual loves and respects comes together and delivers a pre-rehearsed conversation about the addiction. The conversation offers help with a specific goal in mind: Convincing the person to accept treatment.

Any intervention requires careful preparation. Activities such as choosing the right people to involve, selecting the right treatment center, preparing for objections that may arise, and picking the right time and place should be completed in advance. The actual intervention conversation consists of each participant reading an “intervention letter” to the person of concern, which should be prepared ahead of time.

You don’t have to wait for your loved one to reach “bottom” before intervening. If you are seeing warning signs for drug or alcohol abuse, the right time to offer help is now.

IF YOU HAVE ANY QUESTIONS ABOUT PLANNING YOUR INTERVENTION, PLEASE CALL 888-269-0273 TO SPEAK TO AN INTAKE SPECIALIST.
Is There a Drug or Alcohol Problem?

It can be difficult to determine how severe a person’s drug or alcohol use is. People with substance abuse problems often try to hide the true extent of their use. If you have a very close relationship with the person, your intuition is often your best indicator. Completing the following checklist may help you make a decision:

Warning Signs Checklist

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<tr>
<th>Question</th>
<th>Yes</th>
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<tr>
<td>Have you noticed that your loved one has developed a tolerance toward a substance? Does it take more of the substance to produce the same effects on him or her?</td>
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<td>Do his or her eyes often appear glassy, red, or tired? Are his/her pupils dilated?</td>
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<td>Has the individual recently gained or lost a dramatic amount of weight?</td>
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<td>Have you noticed any unusual cuts, sores, bruises, or burns on the individual, especially on the hands, arms, or face?</td>
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<td>Does your loved one sweat excessively at unusual times?</td>
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<td>Does it seem like your loved one has lost control of his/her substance use?</td>
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<td>Does your loved one have difficulty remembering things? Does it seem that he/she is experiencing memory loss?</td>
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<td>Does he/she seem overexcited, hyperactive, or unusually talkative?</td>
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<td>Is the individual experiencing extreme mood swings?</td>
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<td>Is the individual taking uncharacteristic risks (such as promiscuous sex or driving under the influence)?</td>
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<td>Has he/she been arrested lately for fighting, driving under the influence, or public intoxication?</td>
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<td>Has your loved one lost interest in activities or hobbies he/she once enjoyed?</td>
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<td>Has he/she been stealing items (from stores, family, or friends)? Is he/she selling personal items for spending money?</td>
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<td>Has he/she stopped spending time with friends? Has he/she become involved with a new group of friends?</td>
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<td>Has your loved one been having difficulty in his/her relationships with family, friends, or spouse?</td>
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Do you find that he/she frequently arrives late to, or completely misses, work, school, or other commitments?

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<th>Yes</th>
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Does he/she have a different excuse for each absence/lateness? Do the excuses seem unrealistic or far-fetched?

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<th>Yes</th>
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Has the individual been visiting many different doctors for the same condition or pain?

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<th>Yes</th>
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Have you noticed an excessive number of prescription pill bottles in the person’s home or bedroom?

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Have you found drug paraphernalia, such as pipes, syringes, lighters, or razor blades, in the person’s home or bedroom?

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<th>Yes</th>
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Does the individual go missing for long periods, even days?

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<th>Yes</th>
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Does he/she get angry or defensive when you question him/her about drug use?

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<th>Yes</th>
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**Conducting an Intervention**

An intervention should be carefully thought out and planned before it takes place. Here are some suggestions to guide you through the process:

**Do your research.** First, you should research chemical dependency to figure out if what is happening to your loved one is cause for concern. The Warning Signs Checklist in this guide can help you determine if there is a problem. You may even want to talk to a therapist or attend a support group to gain a better understanding of substance abuse. Research treatment centers and make reservations in advance for your loved one at an appropriate facility (*please see the section on “Finding the Right Treatment Center” later in this guide*).

**Get people involved.** People significant to the individual should gather in a group of 6–8. Keep in mind that these people should be important to him or her. Children may be included if appropriate.

**Elect a chairperson.** This person will open the intervention with a statement and guide the readers smoothly through the process. He or she will also be the only person who talks out of turn to address the individual’s questions or objections.
Plan what you are going to say ahead of time. Each person should write a letter to the person of concern and read it during the intervention. This should focus on your love, care, and respect for the individual, as well as your concern and desire to help. Start with what you like about the person and happy memories you have together. Then, voice your concern about the substance abuse and how you feel it has affected both your loved one and others. Speak from the heart, don’t be judgmental, and don’t let the conversation turn into an argument. (Please see the “Intervention Letter Writing Worksheet” on page 8).

Offer treatment. Each person should end their letter by asking the individual to get treatment immediately. After the person of concern agrees to go to treatment, the intervention is over. It may not be necessary for everyone to read their prepared letters. If he or she does not agree, the letter writers may read a set of pre-determined ultimatums or “bottom lines,” explaining what they are prepared to do to stop enabling the addiction.

Rehearse. The group members should practice reading their letters to one another and edit them to remove anger, judgment, and blame. They should also decide the order in which the letters will be read, putting more sensitive readers in between stronger ones.

Pick a time and place. Choose a location that is comfortable, private, and accommodating for the entire group. Seating should be determined ahead of time, including where the person of concern will sit upon arrival. There should be no moving around during the intervention. Everyone involved in the process should be clear-headed and sober, including the person of concern (if possible).
Who Should Be Involved?
You want to invite people who truly care about the individual and want to see him or her get better. They should have a close relationship with, or be influential to, the person of concern. Every addict or alcoholic has people in their lives who enable them. It is important that these enablers are present to make it clear that, should the person refuse treatment, these enabling behaviors will end. Remember not to let your feelings about a person get in the way of who is included in the intervention; if someone is important to your loved one, having him or her present will be beneficial. If a participant is not able to verbalize and follow through with their bottom lines, they should not participate.
Intervention Letter Writing Worksheet

Writing your intervention letter is often the most difficult part of the process. Here is a helpful worksheet to help you construct an effective and well-written letter:

Choosing the words in your intervention letter carefully is critical. Here are some tips on how to get your point across to the individual without sounding judgmental or offending him/her:

• Use sentences that start with “I.” For example, instead of saying, “You worry me when you don’t come home at night,” say, “I worry when you’re out so late.” This removes the blame from your tone.

• Stay away from calling the individual an “addict,” “junkie,” “alcoholic,” or other label.

• Avoid generalizations such as “You always miss work because you’re high.” Instead, use specific examples such as “Last week, you missed work on Tuesday and Friday because you were high.” These will make the allegations hard to deny and your intervention more effective.

• Use words that describe how you feel without expressing blame or judgment such as: angry, concerned, confused, discouraged, frustrated, helpless, hurt, lonely, or worried.

Section I. Care and Concern

This is where you try to remind the person of what his or her life was like before drugs and alcohol. At the same time, emphasize that you love and care about the individual. Ask for his or her full attention and tell him or her that you are speaking sincerely and from the heart.

Start your letter with: “(Person’s name), I am here today because I love and care about you. This is why I want you to seek treatment for your drug/alcohol abuse.”

What are some nice memories you have of the person? Please be as specific as possible, using personal stories or examples.

_______________________________________________________________________

_______________________________________________________________________
What is something fun you used to do together?
_______________________________________________________________________
_______________________________________________________________________

What were some of the person’s hobbies before his or her addiction started?
_______________________________________________________________________
_______________________________________________________________________

Are there any notable things that the person accomplished in the past?
_______________________________________________________________________

Section II. Alcohol and Drug Use
This is where you cite changes in the person’s behavior since he or she started abusing drugs or alcohol. Remember not to blame or judge the addiction or addicted individual while you discuss the negative effects of his or her use.

What have been some negative effects of drug or alcohol abuse on the person’s life? Has he or she suffered any serious consequences? Use specific stories and examples when possible.
_______________________________________________________________________
_______________________________________________________________________

How has his or her use affected you
Physically?
_______________________________________________________________________
_______________________________________________________________________
Mentally?
_______________________________________________________________________
_______________________________________________________________________
Financially?
_______________________________________________________________________
_______________________________________________________________________

What are you concerned will happen if the addiction continues?
_______________________________________________________________________
_______________________________________________________________________

Section III. Closing Statements
In the last part of your letter, you should repeat how much you care about the person and how concerned you are about his or her health. The intervention team should have treatment and transportation pre-arranged and you should be ready to explain why the person should seek treatment, as well as answer questions he or she may have. At the end of your letter, request that the person enter treatment immediately *(today)*.

How do you think the person will benefit from treatment?
_______________________________________________________________________
_______________________________________________________________________

Where and when are you sending him or her to treatment? How is he or she getting there?
_______________________________________________________________________
_______________________________________________________________________

Finish this section by saying: “Will you take the treatment that is being offered to you today?”
IV. Bottom Lines

If a person does not agree to seek treatment after you finish reading the first three sections of your letter, you should proceed to your bottom lines. These are actions that show you are ready to stop enabling the person’s addiction and start helping. Very important: Only read your bottom lines if the person refuses treatment. If your loved one has already agreed to go to treatment, there is no need to introduce the stress of ultimatums. In addition, these should be actions that you will follow through with without wavering or compromising. The effectiveness of bottom lines lies in their strong enforcement, which often leads to your loved one accepting treatment.

Note: you must be prepared to enforce your bottom lines immediately. Thus, they should be carefully considered based on their feasibility and practicality for you personally. Consulting with a professional is strongly suggested when determining bottom lines, because what may work in one situation may cause great harm in another.

What is something specific you have been doing to enable the person’s use?
1. _________________________________________
2. _________________________________________
3. _________________________________________

What are you willing to do to completely stop this behavior?
1. _________________________________________
2. _________________________________________
3. _________________________________________

Now, phrase your bottom lines here:
1) If you don’t seek treatment, I will _________________________________________.
2) If you don’t seek treatment, I will _________________________________________.
3) If you don’t seek treatment, I will _________________________________________.

When you’re finished writing, your letter should look something like the following sample:
Sample Intervention Letter

Mom,
I am here today because I love you. Throughout my life, you have supported me in everything I have wanted to do. You stood proudly in the stands during my high school soccer games, sat in the audience during my college graduation, and watched the birth of my first son, James. I always admired your sunny outlook on life and love of helping people. Over the last decade, your involvement with building houses every weekend for those less fortunate than you has been inspiring. It caused the whole family to go build with you when it fit into our schedules, providing us with an opportunity to become closer as we did something good for others together. I miss doing this activity with you.

Mom, your drinking has become a problem that you cannot control on your own. It is affecting your relationship with the whole family and me. Friday night, when James, Mike and I came over for dinner, you smelled like alcohol when you answered the door. You drank an entire bottle of wine while we ate, and you kept sneaking back to the kitchen to refill your glass while we watched a movie afterwards. By the end of the evening, you had mixed up all of our names. When I arrived to pick you up on Saturday morning, you were still in your pajamas and too drunk to join me at the building event. Before alcohol took over, building used to be one of your favorite activities. James has asked me if he can stop visiting your house after school. He is saddened when you are drunk when he arrives and feels unsafe ever since you passed out with the oven on, causing dinner to start smoking and the fire alarms to go off. We feel like we have lost a family member and companion, as alcohol has changed you, and are afraid that we may never get you back if you don’t seek treatment. We are not mad, we just want what is best for you, and that is seeking treatment today.

We have reserved you a spot at a treatment center. They are expecting you tonight. It is not far from here, and Mike has agreed to drive you. I have already packed you a bag, it is waiting in the car, and Dad is perfectly capable of taking care of the dogs and the housework on his own. Your drinking doesn’t have to go on any longer, help is waiting for you. Please, will you take the treatment that is being offered to you today?

Love,
Amanda
## Handling Objections During the Intervention

In most cases, the addict or alcoholic will offer reasons why he or she can’t go to treatment. Try to anticipate your loved one’s objections ahead of time and formulate responses that reinforce your desire for him or her to get help. Also, be prepared for the individual to become angry, defensive, or even violent, and remember to stay as calm and caring as possible during the process.

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<th>Objection</th>
<th>You should</th>
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| “I can’t leave my spouse/kids/significant other.” | Make arrangements for someone else to take care of the kids. If appropriate, include the children in the intervention. If the spouse/significant other is present at the intervention, he/she should explain why the individual has not been a good parent/spouse in his/her addiction. | “You can be away from your family for a little while now instead of risking losing them forever.”  
“Susie and Billy would really benefit from you getting clean.”  
“By getting sober, you are giving yourself a chance to be the best wife you can be.” |
| “I can’t leave my dog/cat.”                      | Already have the pet packed and ready to say goodbye to the individual once the intervention is over. Make arrangements with a local kennel, family member, or close friend to look after the pet while the individual is in treatment. | “Aunt Sue already has a bed set up for Fido in her apartment.”  
“Mike is going to take Fido to a 30-day kennel tonight.”  
“Carrie is going to stop by your home each day to feed Fluffy and change her litter.” |
| “I’ll lose my job if I go away.”                 | Encourage the individual to talk to the HR department at his or her workplace. Educate yourself and the individual on the Family and Medical Leave Act, an act that may protect his/her job while in treatment. Explain to him/her that the addiction may lead to job loss anyway. | “Your company may hold your job for you.”  
“We’re sure your boss wants you to get better, too.”  
“I’m sure getting help will improve your productivity and performance at work.” |
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<th>Objection</th>
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<td>“Maybe I’ll go tomorrow—I’m not ready today.”</td>
<td>Remember the goal of this intervention is to get your loved one to commit to treatment today. Remind him or her that tickets are bought and reservations are made. Reiterate that this is a one-time offer.</td>
<td>“You’ll be just as scared tomorrow.” “The rehabilitation facility is expecting you tonight and we have already bought your plane tickets for 6:00.” “If you continue down the path of addiction, there may not be a tomorrow.”</td>
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<tr>
<td>“(Family member/friend) isn’t here.”</td>
<td>Inform everyone important to the individual that the intervention is taking place. In the event that someone can’t make it, they can write the individual a letter, call during the intervention, or even participate via webcam.</td>
<td>“Mike isn’t here because his daughter is in the hospital, but he wrote a letter to you that he wants me to read.” “We will be calling Sandy after Joe reads his letter. She is waiting with feelings she wants to share with you.”</td>
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<td>“Treatment is too long/far away.”</td>
<td>Research to find an appropriate program for the individual. In some cases, the best facility is far from home. Explain why you chose the particular center. Explain why the particular length of stay will be most successful in helping your loved one. Find out if the facility you chose will let you visit the individual.</td>
<td>“People with similar addictions generally have the best results with a 6-week program.” “We’ll be there to visit you in a month.” “6 weeks will go by quickly compared to 10 years of using.”</td>
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<td>“Why am I the only one going when (other family member/friend) has a problem too?”</td>
<td>Keep the focus on your loved one—you are concerned with his or her health right now. Explore help options for other group members, and make treatment arrangements if/when appropriate.</td>
<td>“Aunt Sue is getting help for her codependency. She starts CoDA tomorrow.” “We all saw what drugs and alcohol did to Uncle Bob, and we want you to get treatment so that the same doesn’t happen to you.”</td>
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<td>Objection</td>
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<td>“How will I pay my mortgage/car insurance/credit card bills while I’m gone?”</td>
<td>Figure out how you can get access to the individual’s accounts while he/she is gone so you can take care of payments for him/her. Gather everything that will need to be paid and designate who will be in charge of payments. You may need to offer financial assistance.</td>
<td>“We will take care of these things for you while you are gone.” “Joe already has everything in place that he needs to pay your mortgage. We don’t want you to have to worry about these things while you’re getting help.”</td>
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<td>“I need a drink/to get high right now.”</td>
<td>Recognize that your loved one may be struggling with a physical dependence on the substance. Select a treatment center that offers a medical detox. Such a facility can provide advice on this subject before the intervention takes place.</td>
<td>“We understand you have a physical dependence on the substance, so we have chosen a treatment center with a medical detox so that you can stop using comfortably.”</td>
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<tr>
<td>“I have things to do.”</td>
<td>Be aware that a vague statement such as this is usually masking fear of stopping use or going to treatment.</td>
<td>“We can take care of anything you need us to while you are getting help.”</td>
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<tr>
<td>“I don’t need help” or, “My use is under control.”</td>
<td>Remember why the group is conducting the intervention. It has become evident to you that your loved one has a serious problem. Give the individual your prepared examples of the addiction’s effects.</td>
<td>“We wouldn’t be here if we didn’t think you needed help.” “We know you better than anyone, and we see the damage that your addiction has caused.” “Give rehab a try, you can always go back to drugs and alcohol if you wish.”</td>
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### Objection | You should | Try saying
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“No, I’m not going.” | Remind the individual of what you are prepared to do if he/she doesn’t accept treatment today. Emphasize why you think treatment is necessary. Emphasize that this is a one-time gift you are giving your loved one. | “If you decline to go to treatment today, you may not ever have this opportunity again.”
 |  | “If you do not get clean, you may end up in jail or dead.”
“I hate everything in my life, I don’t care if my use kills me.” | Remember that your loved one may be suffering from a mental condition or trauma that contributed to his/her use. Find a treatment center that can diagnose and treat dual diagnosis. | “Treatment can help you identify what is making you feel this way.”
 |  | “You can talk to a therapist in treatment about these feelings.”
 |  | “Rehab can help you work through this, too.”
“I feel like you are ganging up on me/nobody’s on my side.” | Remind your loved one how much you care about him/her. Emphasize that the intervention and treatment arrangements are in his/her best interest. | “We wouldn’t be here if we didn’t love you.”
 |  | “We want what’s best for you, and we believe that is treatment.”

### Choosing the Right Treatment Center for Your Loved One

You should have a rehab facility chosen and a reservation for your loved one in place before you conduct your intervention. When selecting a rehab facility, it is important to consider his or her individual situation. In order to match your loved one’s personal recovery needs with the services and environment provided by the treatment center, you need to know the right questions to ask.

**Here are some examples:**
- Does the drug and alcohol rehab center treat adults or adolescents?
- Does the treatment center provide 24-hour nursing staff?
• Does the facility have both a medical doctor and psychiatrist on staff to care for patients?

• Does the facility provide an on-site medical detox?

• Does the facility treat dual diagnosis? (A dual diagnosis is the presence of a psychiatric disorder that co-exists with an individual’s addiction. A treatment center must treat both diseases to provide a patient with the chance for long-term sobriety.)

• Does the treatment center provide specialty treatment programs for specific populations such as Christians or LGBTQ? (This is critical because it relates to the center’s ability to provide individualized treatment.)

• Does the rehab center offer a family program? (Addiction can put a lot of strain on an individual’s family and loved ones. An optimal treatment center will have a program to help them cope with the damage the addiction caused and repair their relationships with the individual in recovery.)

• Does the center feature multiple levels of care? (Having a detox program at the beginning of treatment or an aftercare plan at the end gives a patient the best chance to get and stay sober.)

• Does the treatment facility accept insurance? (It is important to figure out how your loved one will pay for treatment before you commit to a center. Although many facilities accept insurance, some only accept private payment.)

There are, of course, a number of other factors that figure into choosing the best treatment center for you, and these should not be overlooked. Take a moment and call 888-269-0273, a 24-hour toll-free nationwide helpline, and a specialist can assist you in making the best possible decision for your needs, free of charge.
How Friends and Family Can Help Themselves

Addiction is often referred to as a “family disease” because it affects not only the afflicted individual but also his or her family and friends. It is not easy recovering from the strain that a loved one’s addiction has put on you emotionally, mentally, and physically. Many treatment facilities offer programs designed to help family members cope with the damage caused by a loved one’s addiction while repairing their relationship with the individual. In addition to a rehabilitation center’s family program, you should also take advantage of these available resources:

**Al-Anon**
Al-Anon (and its group for teens, Alateen) is a support group for those affected by someone addicted to alcohol. Meetings offer individuals the opportunity to share stories and hope with others who understand their situation.
For more information, visit [http://www.al-anon.alateen.org](http://www.al-anon.alateen.org)

**CoDA**
CoDA, short for Co-Dependents Anonymous, is an organization devoted to helping people develop healthy relationships. It is perfect for those trying to repair relationships damaged by drug or alcohol addiction.
For more information, visit [http://www.coda.org](http://www.coda.org)

**ACA**
ACA, Adult Children of Alcoholics, is a support group for those who grew up in a home with an alcoholic or otherwise addicted family member. It focuses on identifying and understanding the influences that the addiction has had on each member’s life.
For more information, visit [http://www.adultchildren.org](http://www.adultchildren.org)
If the Intervention Doesn’t Achieve Its Goal

The goal of an intervention is to inspire a change in the addicted individual’s lifestyle. Most often, this change involves an immediate trip to a rehab facility to get help with becoming sober. More often than not, an intervention is met with success; however, your loved one may refuse to admit that he or she has a problem or decline to accept the treatment option you have provided. If this happens, know that having an intervention was the best thing you could have done. Give him or her time to let your suggestion sink in, but follow through with your ultimatums and stop enabling the user’s addiction. If things continue to get worse, consider calling an addiction specialist or trusted medical professional.

Additional Resources

For additional information on addiction, interventions, and rehabilitation facilities, you may find the following resources helpful.

Lakeview Health
http://www.lakeviewhealth.com

The US Substance Abuse & Mental Health Services Administration
http://www.samhsa.gov

The National Institute on Drug Abuse
http://www.drugabuse.gov

The Office of National Drug Control Policy
http://www.ondcp.gov

Alcoholics Anonymous
http://www.aa.org

Narcotics Anonymous
http://www.na.org