Delay, deny, defer” is a common strategy in difficult legal situations, especially when one’s position is weak. It’s also a common strategy when the opposing party doesn’t have the resources or determination to carry on a protracted battle.

Many attorneys have found this same strategy effective in their personal lives as well. When brute force argument won’t win the day, dragging out the process often does. As professionals skilled in the adversarial process, the “delay, deny, defer” strategy comes naturally to them.

But does “delay, deny, defer” work with medical issues? If a person is diagnosed with cancer, is it helpful to employ delaying tactics with the physician? What if the delaying tactics work and treatment is postponed? Is this truly a win?

How about when dealing with thorny family issues or executing business plans? Effective strategies in life, business or health can’t be one-size-fits-all. When it comes to addiction and mental health issues, it’s especially important to take the right approach and to do so in a way that preserves both dignity and confidentiality.

People are often at a loss when faced with a partner’s, friend’s or co-worker’s mental health or chemical dependency issue. Private conversations with the impaired person typically go nowhere and any positive changes that do come about are almost always short-lived. The impaired person soon defaults to the same disconcerting behavior patterns and concerns about the person continue.

A better strategy is to seek help from a professional interventionist.

The Louisiana Lawyers Assistance Program, Inc. (LAP) has developed special expertise and received advanced clinical training in modern techniques for mental health and addiction intervention. Unlike television dramatizations and old-style methods of coercion, current best-practice techniques utilize a dignified and effective method for breaking through “delay, deny, defer,” and opening the door to treatment and recovery.

Addiction and mental health issues worsen over time. They grow larger when left in the shadows and kept as secrets. The first step in helping a colleague is to reach out to the properly trained professionals at LAP. Many wrongly believe that
confidentiality simply can’t be guaranteed and they focus on this issue as a reason not to move forward. But these services are held to the highest standards and confidentiality is, in fact, safeguarded.

As addiction and mental health issues are left unattended, it becomes impossible to keep a lid on problems, and the false hope of maintaining privacy evaporates. Like most problems, these issues are best addressed at the earliest possible stage. Rebuilding a professional and personal life is easier before the worst consequences occur. We also help protect the reputation of the profession at large by taking action.

Modern clinical techniques help the person suffering from addiction or mental health problems to accept the reality of their situation and begin a rational approach to treatment and recovery. Often the biggest obstacle to getting well is getting started, and a well-planned professional intervention is almost always the key.

LAP Executive Director J.E. (Buddy) Stockwell and LAP Clinical Director Leah Rosa both recently completed a week-long training seminar at the Betty Ford Center that has certified them in the Love First method of clinical intervention, based on the best-selling book of the same title. Of special interest to legal professionals is the “Executive Style” intervention method (included in the curriculum along with various other intervention methods). This small-team approach helps safeguard confidentiality and helps preserve a sense of privacy, both of which are crucial for ongoing participation in the program. The Executive Style intervention method is especially successful with public figures and licensed professionals, such as lawyers and doctors.

Harnessing the care and concern of others in a specific and organized way is the best way to turn an intractable situation into a new beginning. Through LAP’s professional facilitation, an Executive Style intervention can be organized quickly, possibly saving careers, families and professional practices. Other styles of intervention also can be organized by LAP, and LAP is now better trained to organize professional interventions for any scenario.

When someone is suffering from addiction and/or mental health problems, those around them may try various informal methods to intervene (if they do anything at all). Almost without exception, they will fail and then falsely conclude they’ve done all they can, assuming there is nothing more that can be done to help the impaired person. They justify not asking others for help in their efforts in the name of confidentiality, but, in truth, they often just want to avoid anything that might stigmatize themselves or the practice at large in the process.

The Love First training has provided Stockwell and Rosa with several different approaches to intervention. The first step is assembling an intervention team, which may be as small as one or two people, in addition to LAP professionals. Education and preparation of the intervention team is essential to the process. A seven-point letter-writing method, careful preparation for objections and discussion of specific means for overcoming anticipated resistance highlight the program.

After the team’s training and education process has been completed, a full rehearsal takes place. Letters are read aloud and edited, objections to treatment are resolved in detail, and last-minute issues are addressed.

Interventions often begin with a difficult moment once the subject of the intervention realizes that the time has come to face his/her issues. The person may dig in and prepare to “delay, deny, defer.” But intervention is a human process, not an adversarial one, and the subject will realize very quickly that concerns come genuinely from the heart, and that a logical way forward has been prepared. When approaching such a person with respect and knowledge, along with professional facilitation, success is highly probable. In fact, years of clinical practice show that 85 percent of such interventions lead directly to treatment.

After treatment begins, the most advanced intervention methods capitalize on the new expertise of the intervention team. The clinical interventionist transforms the intervention team into a recovery team, providing critical support to the patient throughout the treatment and recovery process.

Regular consultations with LAP’s professionals keep the process moving forward and address any issues that may surface along the way. By turning the intervention team into a recovery team, the patient is no longer alone in the process and appropriate ongoing support is provided.

In the event of relapse or other immediate problems, the recovery team is already prepared for the crisis in advance. The ongoing support and guidance of LAP’s professionals give every intervention recovery team the confidence needed to be successful.

How is “delay, deny, defer” working for the person or situation you’re concerned about? Would you benefit from a confidential consultation to discuss the problem? If so, call Louisiana’s LAP and ask to speak to Buddy Stockwell and Leah Rosa, your Bar’s Love First-certified intervention professionals.

Jeff Jay, a clinical interventionist and educator, is the co-author of the best-selling book, Love First: A Family’s Guide to Intervention (2nd Ed., Hazelden, 2008). A graduate of the University of Minnesota, he is a certified addictions professional and heads a national private practice that provides intervention and recovery mentoring services. He served as president of the Terry McGovern Foundation in Washington, D.C. He is also the author of At Wits End: What You Need to Know When a Loved One Is Diagnosed with Addiction and Mental Illness (Hazelden, 2007).

For more information, go to: www.lovefirst.net.