

# PEER INTERVENTION STRATEGIES: WHEN A FRIEND NEEDS A FRIEND

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## Introduction

Given the prevalence of substance abuse, gambling addiction, depression, eating disorders and sexual assault on the university campus, there is a high likelihood that someone you care about – a friend, a relative, a partner or roommate – will at some point in the future confront a health problem that requires the attention of a trained professional. Helping a friend in need is accompanied by a lot of confusing feelings and thoughts. You may wonder how to approach that person or what exactly you should say. You may believe that you are overreacting, perhaps reading too much into a situation that eventually will pass. This individual may be doing things that interfere with your own life – perhaps he or she is even hurting you physically or emotionally. This informational sheet is designed to assist you in understanding when and how to intervene with a friend who is in need.

### **1 Take the time to learn about the common signs and symptoms that might indicate a problem.**

There are a lot of misconceptions about who develops certain problems and what causes those problems. Students who are experiencing difficulties with alcohol, depression, sexuality or food typically exhibit a predictable range of behaviors and emotions. Learning about these behaviors and emotions will increase the likelihood of detecting problems that your friends are facing in the early stages. For example, withdrawal from hobbies and friends, a sudden change from typical daily routine, or disruptions in usual sleep, eating or sexual habits are common indicators that something may not be right. Becoming informed about various health and student life issues increases your ability to take care of yourself and those closest to you.

### **2 Don't wait until the consequences have escalated to a serious level before you confront the person.**

In general, it is easier to address a health-related problem in its earlier stages. Often, we are frightened of confronting those we care about when their behaviors appear to be unhealthy or hurtful to themselves and others. We don't want to lose the friendship, nor do we want to make false accusations or find that our suspicions were mistaken. True friends, however, believe that confronting a problem directly is worth the risk, since the benefits include honest, open communication and the potential for early intervention should a problem indeed exist. Our culture typically emphasizes independence over interpersonal accountability. Ultimately, if a friend is having problem, it is your responsibility to confront them and help them address the problem. If you're thinking that perhaps it's not your business to step in, perhaps you aren't the friend you thought you were.

### **3 Respect the individual's**

**confidentiality.** Nothing can put a rift in a relationship more quickly than irresponsible gossip. If someone you care about is experiencing difficulties, the only person you should be talking to about those difficulties is the person you are concerned about. Calling his or her parents to "tattle," spreading rumors based on conjecture and speculation, or otherwise disrespecting the person's privacy may distance the individual from you and damage your credibility as a true friend.

### **4 Demonstrate your genuine**

**caring.** Nobody wants to feel as though they

are being judged or patronized for their choices or actions. Focusing on your fears, disappointment, confusion, anger and other feelings about this person's behavior will emphasize your concern, but not come across as accusatory. Begin the conversation by saying that you are concerned about this person's well-being, health and success. Express your desire to be supportive and helpful.

**5 Focus your intervention on specific behaviors, not about the individual as a whole.** Avoid generalizations about that individual's character (e.g., you're a liar, you're too perfectionistic, you're not trustworthy, you're a failure, etc.). Such generalizations only cause the listener to become defensive and stop listening. Instead, cite *specific* examples of past actions and statements, and recall the negative consequences of those actions and statements, both for the individual and for those closest to him or her.

**6 Be prepared for defensiveness and denial.** A person with a health-related problem rarely is willing to admit to it on the first confrontation. Many problems such as eating disorders or alcohol abuse serve a purpose; they may help the individual in coping with other life stressors, or they may create a temporary semblance of order and control over their lives. In addition, it requires a lot of courage for any individual to admit that he or she has a problem or needs help. And in some cultures, seeking help is viewed as admitting weakness and may be frowned upon. As a result, the person you confront may, in turn, attack you and your choices. Be persistent, keep the confrontation focused on the individual (and off of you), patiently validate their feelings, then diffuse the person's anger. Don't give up. You may have to confront a countless number of times before the

message is heard.

**7 Establish boundaries.** Most individuals with health problems are unable to recognize that they have one until they have had to face the negative, inescapable consequences of their actions and choices. However, many of us have strong caretaking and care giving instincts. When we see a friend in need, we want to be able to give them whatever is necessary to alleviate the pain or distress; we want to "fix" the problem for them. However, many individuals with health problems can be very manipulative of their significant others -- whether intentionally so or not. They will have a constant stream of excuses for why things are going badly, and frequently blame others for their difficulties without owning any personal responsibility. Be sure that you don't inadvertently enable unhealthy behaviors by giving in to the person's demands, pleas, or arguments. For example, if a roommate is missing a lot of classes due to excessive drinking hangovers, volunteering to take notes for him or her will only prolong the problem.

**8 Become familiar with campus and community resources.** Remember, you are a friend who is concerned, but you do not possess the knowledge or skills to solve your friend's problem for him or her. Ultimately, the responsibility for change lies within the individual who has the problem. No one else can do the work or healing for him or her. Therefore, the end-goal of your confrontation is to encourage your friend to seek assistance from a trained professional with counseling expertise and accurate health information. By becoming aware of the vast array of resources available now, you will save time later when you really need to make some quick referrals.

## Health Resources On and Around the UW-Madison Campus

### For depression and suicide:

- UHS Counseling & Consultation Services 265-5600
- UHS Counseling & Consultation Services (After Hours) 265-5600
- Dane County Mental Health Department (Crisis Line) 280-2600

### For sexual assault/rape:

- UHS Counseling & Consultation Services (After Hours) 265-5600
- Student Advocacy & Judicial Affairs, Offices of the Dean of Students 263-5700
- Dane County Rape Crisis Center (24-hour hotline) 251-7273

### For domestic violence/couples violence:

- UHS Counseling & Consultation Services (After Hours) 265-5600
- Student Advocacy & Judicial Affairs, Offices of the Dean of Students 263-5700
- Campus Women's Center 262-8093
- Domestic Abuse Intervention Services (24-hour hotline) 251-4445

### For eating disorders:

- Counseling & Consultation Services, Healthy Eating Program 265-5600
- Campus Women's Center 262-8093

### For HIV and other sexually transmitted diseases:

- University Health Services 265-5600
- Planned Parenthood of Wisconsin 256-7257
- Madison Public Health Department - Anonymous HIV Testing 246-4516
- Madison Public Health Department - STD Clinic 246-4516

### For unplanned pregnancy:

- University Health Services, Women's Clinic 265-5600
- Planned Parenthood of Wisconsin 256-7257

### For alcohol and other drug abuse:

- UHS Counseling & Consultation Services 265-5600
- Dane County Alcohol & Other Drug Abuse Programs 242-6200
- Alcoholics Anonymous 222-8989
- Narcotics Anonymous 258-1747
- Prevention & Intervention Center for Alcohol & Other Drug Abuse 246-7600

### For gambling addiction:

- UHS Counseling & Consultation Services 265-5600
- Manning Counseling Center Inc. 255-1116
- Wisconsin Council on Problem Gambling, Inc. 800-426-2535

### For sexual/racial harassment:

- Student Advocacy & Judicial Affairs, Offices of the Dean of Students 263-5700
- Equity & Diversity Resource Center 263-2378
- Campus Women's Center 262-8093

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