

Stages of Readiness

“Principles”

- Motivation exists along a continuum of readiness;
- Clients progress through stages in a spiral (not linear);
- When enhancing motivation, if the clinicians use strategies in a stage other than the one the client is in, the result could be treatment noncompliance;
- If clinicians push clients at a faster pace than they are ready to take, the therapeutic alliance may break down;
- Relapse is an event, not a stage.

Stage of Change Model

Prochaska & DiClemente (1992)

1. PRECONTEMPLATION
2. CONTEMPLATION
3. PREPARATION
4. ACTION
5. MAINTENANCE

Stage 1: Pre-Contemplation

Individual is unaware, unable, unwilling to change. No intent to change.

- Indicators: argue, interrupt, deny, ignore, avoid reading, talking, or thinking about the behavior...
- Individual is traditionally characterized as resistant, unmotivated.

Stage 1: Pre-Contemplation: Clinical Tools

- Establish rapport
- Determine why the client has come to you.
- Introduce ambivalence about recovery – why it might be a good idea, e.g., “why do you think other people decide to manage their disorders?”
- Give information on risks, pros & cons of use
- Acknowledge the client’s thoughts, feelings, fears, and concerns.
- Keep the interview informal

Stage 2: Contemplation

Individual is ambivalent or uncertain regarding behavior change.

- Indicators: Individual meets clinician “half way,” willing to look at pro and cons of behavior change
- Individual is traditionally characterized as unpredictable, time intensive.

Stage 2: Contemplation

Clinical Tools

- Discuss & weigh pros/cons of recovery
- Emphasize client's free choice & responsibility
- Elicit self-motivational statements
- Discuss the client's goals in life, how will recovery affect these?
- Reduce the fear of recovery through example and problem solving
- Ask questions that clarify motivation e.g., "what's most important to you... why?"

Stage 3: Preparation

Individual shifts from thinking about behavior change to planning first steps.

- Indicators: Individual asks questions, considers options, demonstrates openness in considering behavior change.
- Individual is traditionally characterized as compliant, “coming along,” “good to work with.”

Stage 3: Preparation

Clinical Tools

- Support efforts to change
- Clarify goals & identify successful strategies
- Structure plan of action with client based on client's history and willingness, allowing client to decide
- Encourage client to commit to action
- Give client clear, consistent and unequivocal message about recovery

Stage 4: Action

Individual demonstrates steps toward behavior change such as periods of abstinence.

- Indicators: Individual is receptive to clinical interventions. Treatment compliance is normal. Demonstrated behavior change affects positive outcomes in other areas (i.e., relationships at home and work).
- Individual is traditionally characterized as “successful,” “working the program.”

Stage 4: Action

Clinical Tools

- Seek commitment to specific behavioral change at each session
- Acknowledge difficulties, support even minimal progress
- Identify risky situations, triggers & coping strategies
- Help client find new reinforcers
- Support perseverance (“Sticking to the plan”)
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Stage 5: Maintenance

Individual sustains treatment goals.

- Indicators: Individual has made behavior changes, practices stable abstinence, met treatment goals, and practices healthy coping strategies.
- Individual is traditionally characterized as “ready for successful discharge,” “no longer needing treatment,” “ready for aftercare.”

Stage 5: Maintenance

Clinical Tools

- Support and affirm changes
- Rehearse new coping strategies and countermeasures to triggers
- Review personal growth long-term goals
- Encourage client to contribute to recovery of others

Appropriate Motivational Strategies for Each Stage of Change

Client's Stage of Change	Appropriate Motivational Strategies for the Clinician
<p data-bbox="205 646 837 701"><u>Stage 1: Precontemplation</u></p> <p data-bbox="118 801 925 982">The client is not yet considering change or is unwilling or unable to change.</p>	<ul data-bbox="967 651 1791 1108" style="list-style-type: none"><li data-bbox="967 651 1791 762">◆ Establish rapport, ask permission, and build trust.<li data-bbox="967 791 1791 968">◆ Raise doubts or concerns in the client about substance-using patterns<li data-bbox="967 996 1791 1108">◆ Express concern and keep the door open

Client's Stage of Change	Appropriate Motivational Strategies for the Clinician
<p data-bbox="266 449 837 499"><u>Stage 2: Contemplation</u></p> <p data-bbox="142 649 961 892">The client acknowledges concerns and is considering the possibility of change but is ambivalent and uncertain.</p>	<ul data-bbox="999 449 1799 1049" style="list-style-type: none">◆ Normalize ambivalence.◆ Help the client "tip the decisional balance scales" toward change◆ Elicit and summarize self-motivational statements of intent and commitment from the client.◆ Elicit ideas regarding the client's perceived self-efficacy and expectations regarding treatment.

Client's Stage of Change

Appropriate Motivational Strategies for the Clinician

Stage 3: Preparation

The client is committed to and planning to make a change in the near future but is still considering what to do.

- ◆ Explore treatment expectancies and the client's role.
- ◆ Clarify the client's own goals
- ◆ Negotiate a change--or treatment--plan and behavior contract.
- ◆ Consider and lower barriers to change.
 - Help the client enlist social support.

Client's Stage of Change

Appropriate Motivational Strategies for the Clinician

Stage 4: Action

The client is actively taking steps to change but has not yet reached a stable state.

- ◆ Engage the client in treatment and reinforce the importance of remaining in recovery.
- ◆ Acknowledge difficulties for the client in early stages of change.
- ◆ Help the client identify high-risk situations through a functional analysis and develop appropriate coping strategies to overcome these.

Client's Stage of Change

Appropriate Motivational Strategies for the Clinician

Stage 5: Maintenance

The client has achieved initial goals such as abstinence and is now working to maintain gains.

- ◆ Support lifestyle changes.
- ◆ Affirm the client's resolve and self-efficacy.
- ◆ Help the client practice and use new coping strategies to avoid a return to use.
- ◆ Develop a "fire escape" plan if the client resumes substance use.
 - Review long-term goals with the client.