

# **Stages of Change: A Primer**

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CBT Methodologies – 1970's

“Biopsychosocial Model” – 1977

Neurotransmitters – 1979

Stages of Change – 1983

Drug Courts – 1980's

Motivational Interviewing – 1991

ASAM Criteria – 1991

Mindfulness/Trauma – 1990's

Medication Assisted Treatment

The Epidemiologic Catchment Area Study  
(1980-1984) – 19,000



The National Comorbidity Survey  
(1990-1992) – 8100  
(2001-2003) – 9300

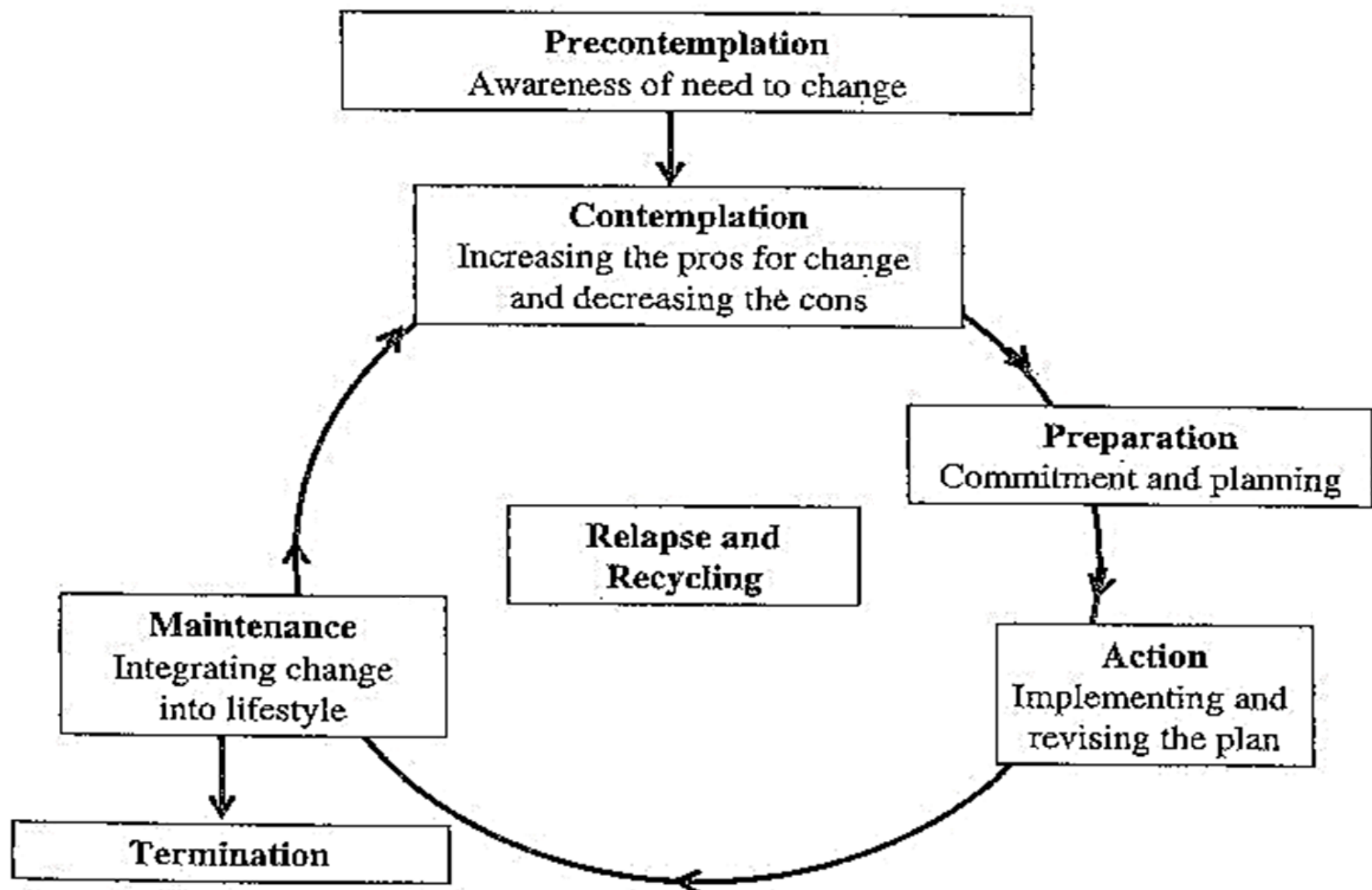
The National Epidemiologic Survey on Alcohol  
and Related Conditions  
(2002-2002) – 43,000

**BIOPSYCHOSOCIOFAMILIALECONOSPIRITUS**

**Treatment**: “Application of planned procedures to identify and change patterns of behavior that are maladaptive, destructive, or health injuring; or to restore appropriate levels of physical, psychological, or social functioning.”

(Rinaldi et al., 1988, p.557)

# **Denial Resistance**



**FIGURE 1.1.** A cyclical representation of movement through the stages of change. From DiClemente (2003, p. 30). Copyright 2003 by The Guilford Press. Reprinted by permission.

**TABLE 2.2. Processes of Change Predominantly Associated with Stage Movement**

From precontemplation to contemplation	From contemplation to preparation	From preparation to action	From action to maintenance	Staying in maintenance
Consciousness raising				
Emotional arousal/ dramatic relief				
Self-reevaluation	Self-reevaluation			
Environmental reevaluation	Environmental reevaluation			
		Self-liberation	Self-liberation	Self-liberation
		Stimulus control	Stimulus control	Stimulus control
		Counterconditioning	Counterconditioning	Counterconditioning
			Reinforcement management	Reinforcement management
		Helping relationships	Helping relationships	Helping relationships
	Social liberation			Social liberation

Note. From Velasquez, Maurer, Crouch, and DiClemente (2001, p. 10). Copyright 2001 by The Guilford Press. Reprinted by permission.



**Consciousness Raising:** Increasing information about self and problem: observations, confrontations, interpretation, bibliotherapy.

**Self Reevaluation:** Assessing how one feels and thinks about one's self with respect to a problem: value clarification, imagery, corrective emotional experience.

**Self Liberation:** Choosing and commitment to act or belief in ability to change: decision making therapy, new years resolution, logo therapy techniques, commitment enhancing techniques.

**Counterconditioning:** Substituting alternative for problem behaviors: relaxation, desensitization, assertion, positive self statements.

**Stimulus Control:** Avoiding or countering stimuli that elicit problem behaviors: restructuring one's environment (e.g. removing alcohol or fattening foods), avoiding high risk cues, fading techniques.

**Reinforcement Management:** Rewarding one's self or being rewarded by others for making changes: contingency contracts, overt and covert reinforcement, self-reward.

**Helping Relationships:** Being open and trusting about problems with someone who cares: therapeutic alliance, social support, self help groups.

**Dramatic Relief:** Experiencing and expressing feelings about one's problem and solutions: psychodrama, grieving losses, role playing.

**Environmental Reevaluation:** Assessing how one's problem affects physical environment: empathy training, documentaries.

**Social Liberation:** Increasing alternatives for non-problem behaviors available in society: advocating for rights of repressed, empowering, policy interventions.

**Precontemplation** → Contemplation

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## **Common Characteristics of Individuals in the Precontemplation Stage**

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- Not interested or concerned about problem or need to change
  - Defensive
  - Resistant to suggestion of problems associated with their drug use
  - Lacking awareness of a problem
  - Uncommitted to or passive in treatment
  - Engaging in little if any activity that could shift their view or perspective
  - Consciously or unconsciously avoiding steps to change their behavior
  - Often pressured by others to seek treatment
  - Feeling coerced and “put upon” by significant others
  - Not convinced that the negative aspects of their substance use outweigh the positive
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*Note.* Adapted in part from DiClemente (2003) and Prochaska and DiClemente (1983, 1984).

Precontemplation → Contemplation → Preparation

Consciousness Raising  
Dramatic Relief  
Environmental Reevaluation  
Social Liberation

## Common Characteristics of Individuals in the Contemplation Stage

- Seeking to evaluate choices and understand their behavior
- Distressed
- Desirous of exerting control or mastery
- Thinking about making change
- Ambivalent
- Have not begun taking action and are not yet prepared to do so
- Frequently have made attempts to change in the past
- Evaluating pros and cons of their behavior
- Evaluating risks and benefits of making changes in their behavior

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*Note.* Adapted in part from DiClemente et al. (1991), DiClemente and Hughes (1990), and Prochaska and DiClemente (1984, 1992).

# Preparation → Action

Self-Liberation

Stimulus Control

Counterconditioning

Helping Relationships

**Common Characteristics of Individuals in the Preparation Stage**

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- Intending to change their behavior
  - Ready to change in terms of both attitude and behavior
  - On the verge of taking action
  - Engaged in the change process (possibly making small changes like cutting down)
  - Prepared to make firm commitments to follow through on the action option they choose
  - Making or having made the decision to change
  - Open to planning and creating a personal change plan
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*Note.* Adapted in part from DiClemente and Prochaska (1998), DiClemente et al. (1991), Prochaska and DiClemente (1992), and Prochaska, DiClemente, and Norcross (1992).

**Action**



### **Common Characteristics of Individuals in the Action Stage**

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- Client has decided to make change and reached the date to implement the change.
  - Client has verbalized or otherwise demonstrated a firm commitment to making change.
  - Efforts to modify behavior and/or one's environment are being taken.
  - Client presents motivation and effort to achieve behavioral change.
  - Client has committed to making change and is involved in behavioral change processes.
  - Client is willing to follow suggested strategies and activities to change.
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*Note.* Adapted in part from Prochaska and DiClemente (1984, 1992) and DiClemente and Hughes (1990).

Action → **Maintenance**

Self-Liberation

Stimulus Control

Counterconditioning

Reinforcement Management

Helping Relationships

## Common Characteristics of Individuals in the Maintenance Stage

- Client is working to sustain changes achieved to date.
- Considerable attention is focused on avoiding slips or relapses.
- Client may describe fear or anxiety regarding relapse when facing a high-risk situation.
- Less frequent but often intense temptations to use substances or return to substance use may be faced.
- Beginning to build an alternative lifestyle that does not include the old behavior.

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*Note.* Adapted in part from Prochaska and DiClemente (1984, 1992) and DiClemente and Hughes (1990).

**Maintenance ← Sustaining**

Self-Liberation

Stimulus Control

Counterconditioning

Reinforcement Management

Helping Relationships

Social Liberation

TABLE 1.1. Stages of Change and Associated Features

Stage of change	Main characteristics of individuals in this stage	To move to next stage	Intervention match
Precontemplation	<ul style="list-style-type: none"> <li>No intent to change</li> <li>Problem behavior seen as having more pros than cons</li> </ul>	<ul style="list-style-type: none"> <li>Acknowledge problem</li> <li>Increase awareness of negatives of problem</li> <li>Evaluate self-regulatory activities</li> <li>Create interest and concern</li> </ul>	<ul style="list-style-type: none"> <li>Do <i>not</i> focus on behavioral change</li> <li>Use motivational strategies</li> </ul>
Contemplation	<ul style="list-style-type: none"> <li>Thinking about changing</li> <li>Seeking information about problem</li> <li>Evaluating pros and cons of change</li> <li>Not prepared to change yet</li> </ul>	<ul style="list-style-type: none"> <li>Make decision to act</li> <li>Engage in preliminary action</li> </ul>	<ul style="list-style-type: none"> <li>Consciousness raising</li> <li>Self-reevaluation</li> <li>Environmental reevaluation</li> </ul>
Preparation	<ul style="list-style-type: none"> <li>Ready to change in attitude and behavior</li> <li>May have begun to increase self-regulation and to change</li> </ul>	<ul style="list-style-type: none"> <li>Set goals and priorities to achieve change</li> <li>Develop acceptable and effective change plan</li> </ul>	<ul style="list-style-type: none"> <li>Same as contemplation</li> <li>Increase commitment or self-liberation</li> </ul>
Action	<ul style="list-style-type: none"> <li>Modifying the problem behavior</li> <li>Learning skills to prevent reversal to full return to problem behavior</li> </ul>	<ul style="list-style-type: none"> <li>Apply behavior change methods for average of 6 months</li> <li>Increase self-efficacy to perform the behavior change</li> </ul>	<ul style="list-style-type: none"> <li>Methods of overt behavior change</li> <li>Behavioral change processes</li> </ul>
Maintenance	<ul style="list-style-type: none"> <li>Sustaining changes that have been accomplished</li> </ul>	<ul style="list-style-type: none"> <li>Integrate change into lifestyle</li> </ul>	<ul style="list-style-type: none"> <li>Methods of overt behavior change continued</li> </ul>

Note. Data from Prochaska and DiClemente (1983, 1992) and DiClemente (2003).

### **Representative Clinical Strategies Applicable to Clients in the Action Stage**

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- Maintain client engagement in treatment.
  - Support a realistic view of change through small, successive, and successful steps.
  - Acknowledge the difficulties encountered in the early stages of change (withdrawal, distress, discomfort).
  - Help client identify high-risk situations through a functional analysis and develop appropriate coping strategies to overcome these.
  - Assist client in finding new sources of reinforcement to support positive change.
  - Help client assess whether he or she has strong family and social support.
  - Promote seeking support from mutual help groups.
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*Note.* From Miller (1999).

## **Representative Clinical Strategies Applicable to Clients in the Maintenance Stage**

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- Help client identify and sample drug-free sources of satisfaction (i.e., develop new reinforcers).
  - Support lifestyle changes that support freedom from dependence on substances.
  - Affirm client's resolve and self-efficacy.
  - Help client practice, apply, and sustain new coping strategies to avoid a return to drug use.
  - Maintain supportive contact.
  - Help client resolve any additional mental health, physical health, and life context problems.
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*Note.* From Miller (1999).

