

STAGES OF CHANGE

TRANSTHEORETICAL STAGES OF CHANGE

- Other theories of change conceive of change as an event (e.g., quitting smoking, drinking, etc.)
- The Transtheoretical Model construes change as a process involving progress through a series of five stages.

STAGES OF CHANGE

- **Pre-contemplation** (“Resisting change”)
- **Contemplation** (“Change on the horizon”)
- **Preparation** (“Getting ready”)
- **Action** (“Time to move”)
- **Maintenance** (“Staying there”)
- **Termination** (“Ending the cycle of change”)

**Any movement from one stage to
another is progress**

PRE-CONTEMPLATION

It is not that they can't see the solution.

It is that they can't see the problem

- G.K. Chesterton

PRE-CONTEMPLATION

**MOST PRECONTEMPLATORS
DON'T WANT TO CHANGE
THEMSELVES, JUST THE PEOPLE
AROUND THEM.**

Prochaska, DiClemente & Norcrosse
Changing for Good

PRE-CONTEMPLATION

- **Individual may or may not be aware that a problem exists**
- **Lacks information about problem**
- **Often coerced into treatment by S.O., court, work**
- **Often wants others to change (e.g., stop nagging)**
- **May have given up**

PRE-CONTEMPLATION

- **Precontemplation = not considering change**
 - Sees no reason to change
 - Refuses to change
 - Afraid to change
 - Actively resists change
 - “Can’t change”
 - Passively resists change
 - Has decided not to change

PRE-CONTEMPLATION

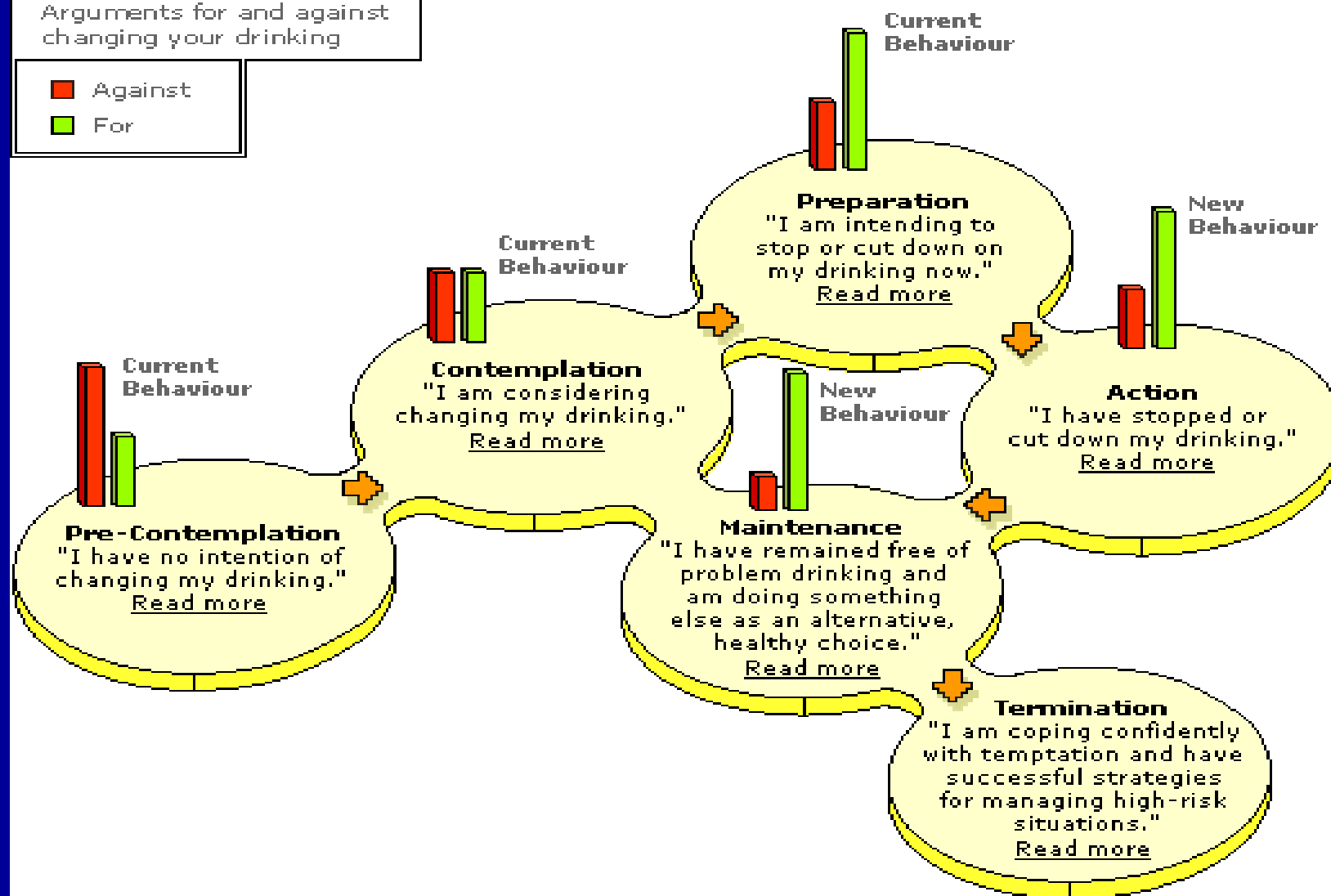
- **Change is not anticipated within the next six months**

PRE-CONTEMPLATION

- Denial is common
- Typical statement:
 - “Problem? What kind of problem?”
 - “I’m not one of those people”

Arguments for and against
changing your drinking

- Against
- For



CONTEMPLATION

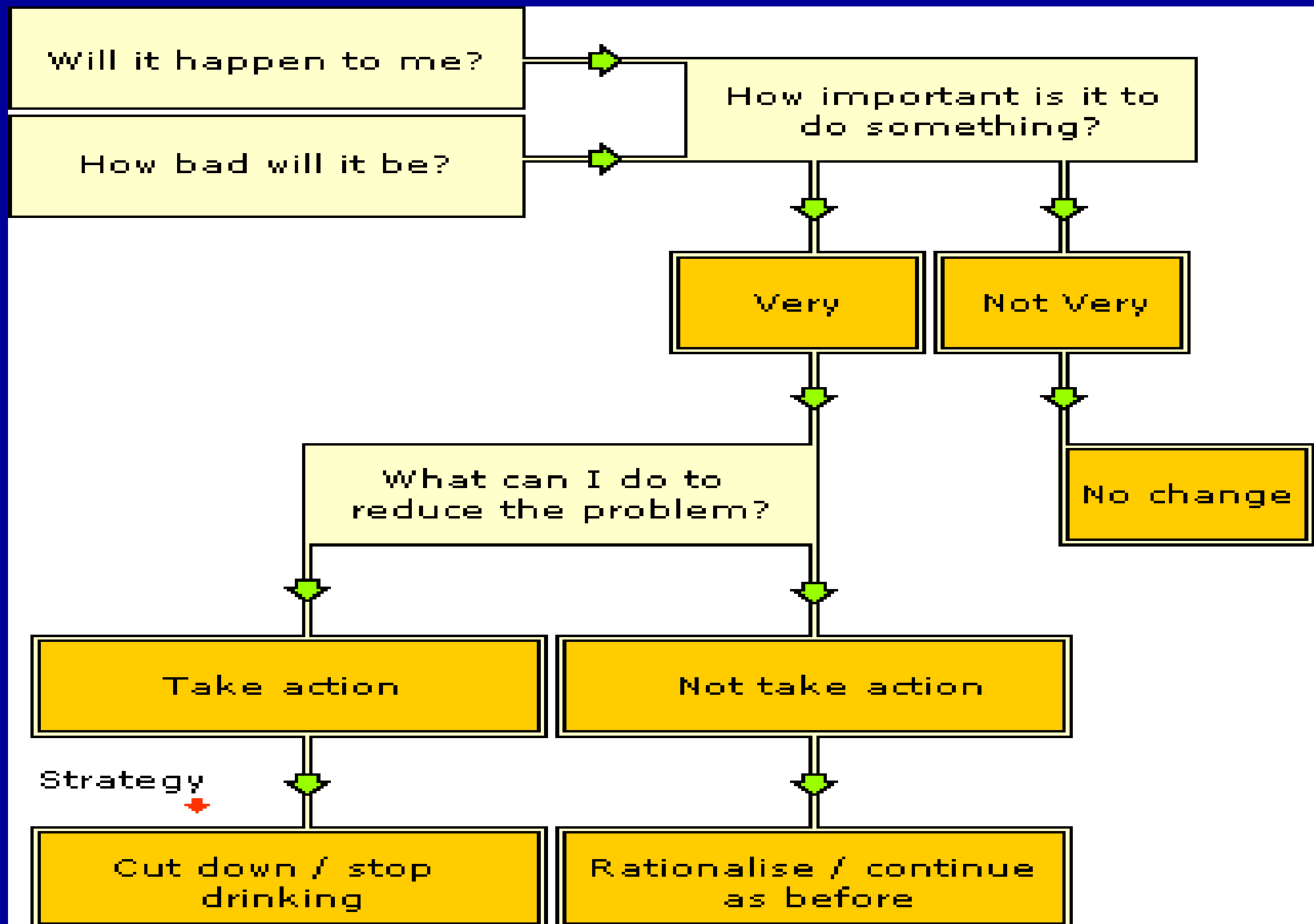
- **Client begins to realize that a problem exists**
- **Clients trying to understand problem**
- **May be aware that there are solutions to the problem, but is “not ready”**
- **Support from others often low**

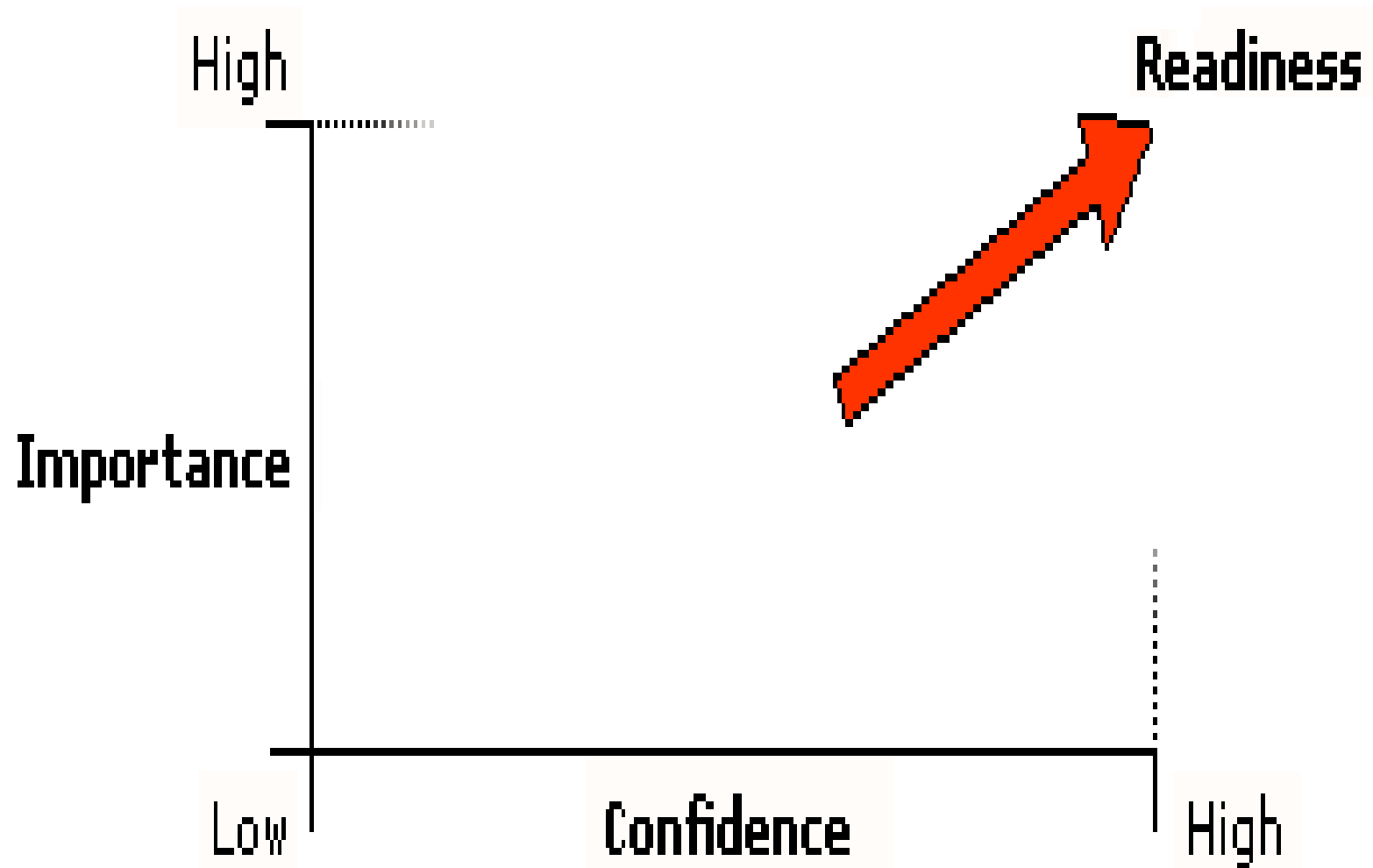
CONTEMPLATION

- **Client is**
 - **Ambivalent about change**
 - **Sees advantages in both the current behavior and the new behavior**
 - **Sees disadvantages in both the current behavior and the new behavior**

Contemplation

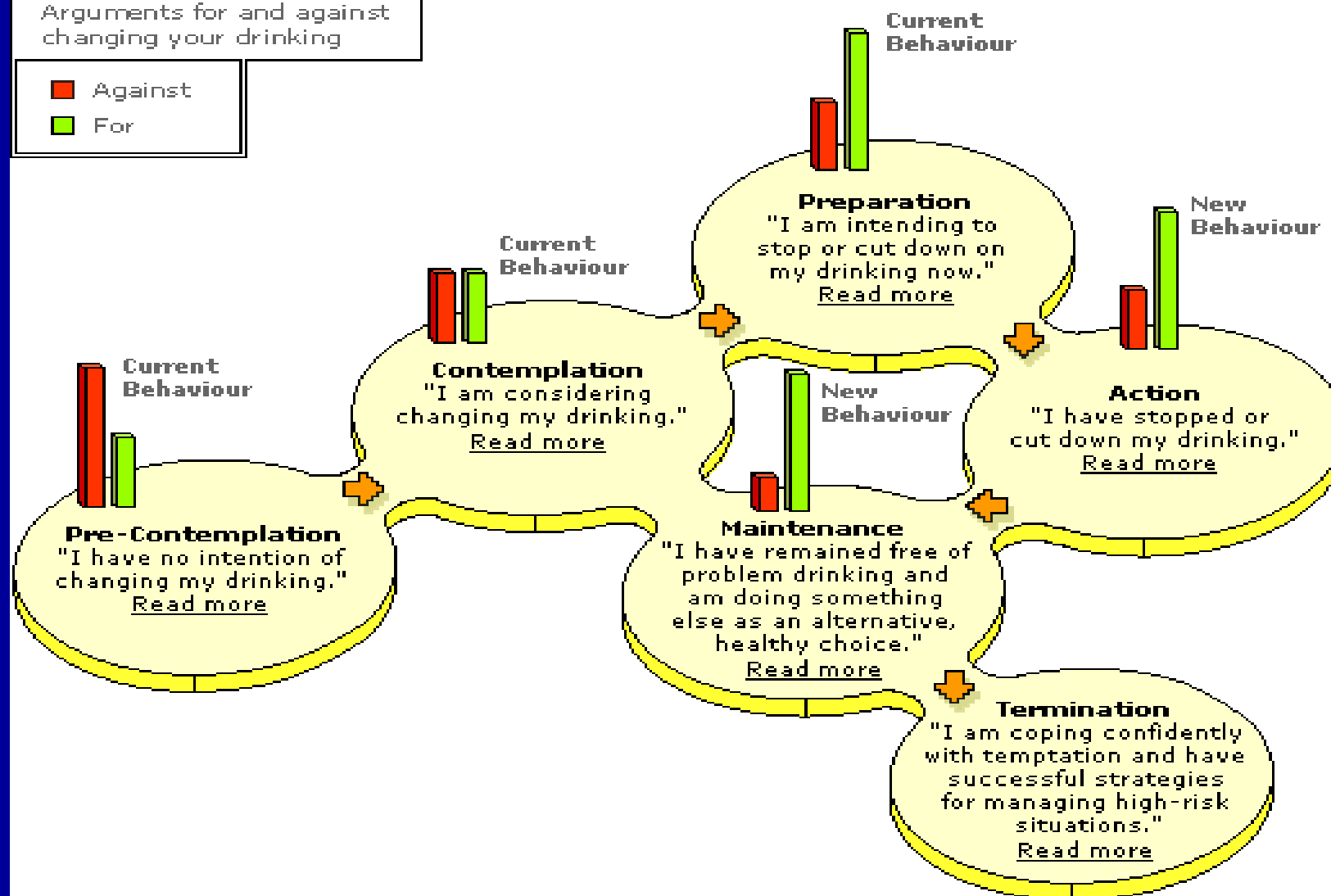
- Typical client statements:
 - “I think I have a problem”
 - “Maybe this is worse than I thought”
- Transition from this stage marked by:
 - Thinking more about solution than problem
 - Focusing more on future than present





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PREPARATION

- **Most people in the preparation stage are planning to take action within the next month**
- **Client begins talking to friends, family, co-workers, counselor about “What works?”**
- **Client “shopping around” for the best way to change**

PREPARATION

- **Has resolved most or all of the ambivalence about change, but remnants may remain**
- **Willing to accept advice and direction**
- **Anxious about the new behavior—seeks reassurance**

PREPARATION

- **Some small changes may already have been made**
- **Important step is making public intention to change**
- **Client may appear ready to take action, but some ambivalence often lingers**

PREPARATION

- Typical client statements:
 - “How did you do it?”
 - “Maybe I should try a support group”
- Plan of action is developed

PREPARATION

- Support from others may be low prior to plan development
- Change is occurring, but it is less visible
 - attitude/thinking
 - awareness
 - emotions
 - self-image

ACTION

- **Client begins trying to change**
- **Change has been initiated within the last six months**
- **This phase requires more commitment of time and energy**
- **Support from others is often high due to visibility of change process**

ACTION

- Typical client statements:
 - “I’m going to do something about my smoking”
 - “I’m going to a support group meeting tonight”
 - “I bought some nicotine mints”

MAINTENANCE

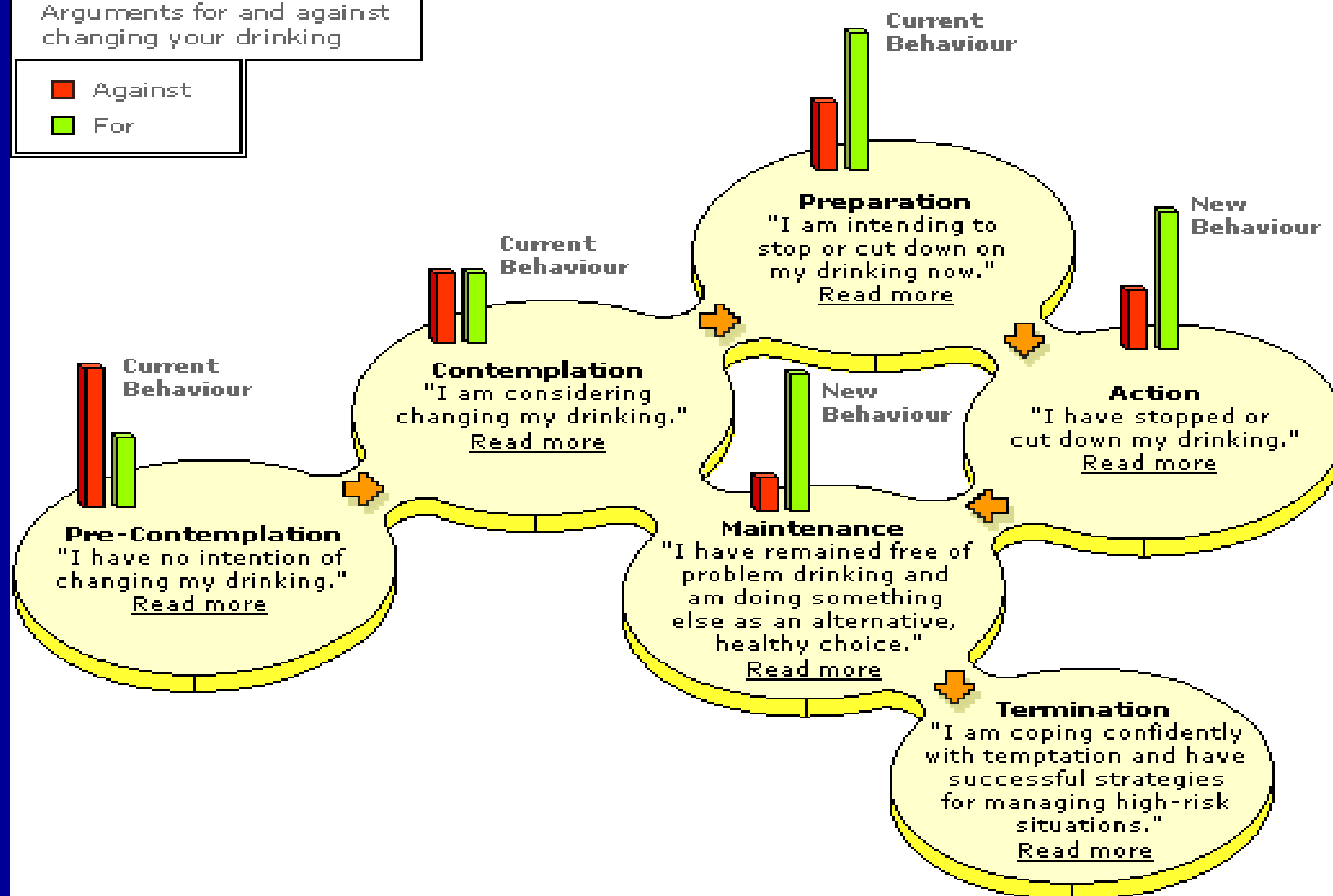
- **Primary goals:**
 - **maintain changes**
 - **work to prevent lapses and relapses**

MAINTENANCE

- **Less of a phase or stage than a long-term commitment**
- **Support from others often high**

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TERMINATION

- The ultimate goal of the change process
- Occurs when:
 - behavior in question is no longer a temptation or threat
 - individual can cope without fear of relapse
- This stage is not always a realistic goal

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