

Caring Safely Module 9-2

Stages of Change with Compassion Fatigue

In This Module

- Stages of Change Model
 - Pre-Contemplation
 - Contemplation
 - Preparation
 - Action
 - Maintenance
 - Relapse/Recurrence
 - Termination
- Before looking for change - where are they - what stage do you need to start at?

The Stages of Change Model (Transtheoretical Model)

- People Tend to Progress towards successful change through different stages (Prochaska, DiClemente, Norcross, 1992).
- A Dynamic Approach to facilitate change in clients when combined with Motivational Interviewing (Miller, Rollnick, 2002).

The Stages of Change Model



Precontemplation

Characteristic	Technique
Person is not considering change, is unable or unwilling to change.	Validate Lack of Readiness. Establish rapport, build trust. Empathy. Open-ended Questions. Reflective Listening. Encourage Re-evaluation of current behaviour.
“What Problem? I do not have a problem”	Legitimize the Cons. Address Benefits of Change. Explore Barriers to Change. Personalize the risk. Elicit Significant Emotion.
Hallmark: Resistance	Shift attention to costs of status quo and the benefits of change. Raise Doubts/Concerns.

Contemplation

Characteristic	Technique
Acknowledgement of the Problem.	Open ended questions. Reflective Statements. Normalize Ambivalence.
Thinking about changing does not equal commitment to quit problematic behaviour.	Legitimize Dilemma. Explore client’s reason for change (value). Summarize Pros and Cons.
Any commitments have not been made so far. Not considering change within the next month.	Use probing questions to amplify pros of change and consequences of client’s behaviour and valued goals. Risk/Reward Analysis.
Hallmark: Ambivalence – sitting on the fence.	Elicit Clients’ self-motivational statement of intent to change. Instill hope that change is possible and identify positive outcomes.

Preparation

Characteristic	Technique
Has made a decision to change.	Open ended questions. Reaffirm commitment to change. Generate change strategies and plan. Clarify their goals.
Is committed to and planning a change in the near future but is still considering what to do. Planning to act within one month.	Anticipate barriers and plans actions. Reinforce plan as experiment. Provide alternative information if client asks. Identify resources.
Hallmark: Steps towards change – Testing the waters.	Assess the strengths of the commitment. Help them articulate commitment and problem solve. Encourage small steps.

Action

Characteristic	Technique
Is actively implementing a plan for change.	Collaborate to evaluate plan. Engage client in treatment. Support a realistic view of change through small steps.
Has not yet reached a stable state. Practicing new behaviour for 3-6 months.	Help client identify rewards of new behaviors. Help find new reinforcers of positive change. Acknowledge feelings of loss.
Hallmark: Modifies the behavior/overt efforts.	Help client identify what worked and why, or what didn't and why. What are high-risk situations. Help client understand relapses are inherent to change. Frame plan as flexible and negotiable.

Maintenance

Characteristic	Technique
Achievement of initial goals. Continued commitment to sustaining new behavior.	Process and support behaviour changes. Renew reasons for change. Reinforce success.
Need to work on monitoring and maintaining gains. Post six months. Until previous behavior no longer desirable option or urges for it.	Help them attribute success to own efforts. Review long-term goals. Plan for follow-up supports.
Need to follow the strategies to prevent relapse.	Help identify risk situations. Identify relapse prevention strategies and engage in these strategies. Discuss coping with relapse.

Relapse/Recurrence

Characteristic	Technique
Experience of a recurrence of symptoms. Resuming old behaviors.	Help them to re-enter the change cycle. Maintain supportive contact.
Need to cope with consequences.	Relapse as a learning experience. Evaluate the trigger for relapse. Reassess motivation and barriers.
Decision what to do next.	Assistance in finding alternative coping strategies.

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