

# TIPPING THE MOTIVATIONAL BALANCE FOR CHANGE!

## Session 3: Stages of Change

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SPECIAL DIABETES PROGRAM FOR INDIANS

# WHAT HAPPENED IN SESSION 2?

- Discussed ways of having the client/participants tell us their reasons for change by:

Asking evocative questions  
Exploring pro's and con's  
Asking for elaboration

Imagining extremes  
Looking forward  
Looking back

- Talked about ways to develop discrepancy between current behaviors and goals through well-formed questions that help the client/participant consider the many aspects of change
- Explore the 4 types of self motivational statements

Problem Recognition  
Expression of Concern

Intention to Change  
Optimism for Change

# WHAT WE'LL DISCUSS THIS WEEK:

- Stages of Change – In the beginning
- The Transtheoretical Model
- The 5 Stages of Change
  - ✓ Common behaviors associated
  - ✓ What it sounds like
  - ✓ Our role

**“You’re a hard habit to break”**

**-Super group, Chicago**



# BRIEF HISTORY

## STAGES OF CHANGE



Prochaska developed the Stages of Change



1977

Early years helped with smoking cessation



1990's

Currently many uses across a variety of fields



NOW

Discovered it is helpful in a dynamic change process



1980's

Discovered it was effective with multiple behavior changes



2000's



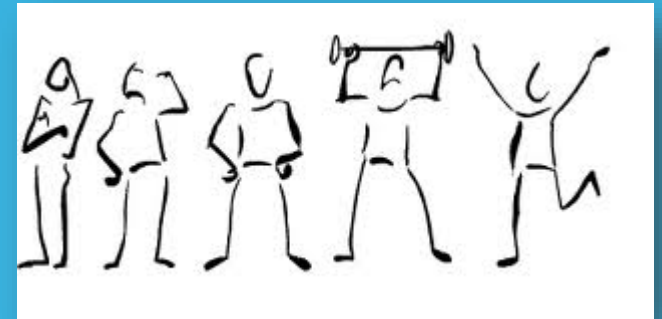
# A LITTLE ABOUT STAGES OF CHANGE

- Motivation exists along a continuum of readiness
- Clients progress through stages in a spiral (not linear) way
- Instead of enhancing motivation, we will generate resistance if we use strategies that don't match the stage of the patient/client
- We assist the client/participant with their decisional balance



# THE TRANSTHEORETICAL MODEL PROCESSES OF CHANGE

- **Consciousness-Raising:** increasing awareness via information, education, and personal feedback about the healthy behavior
- **Dramatic Relief:** feeling fear, anxiety, or worry because of the unhealthy behavior, or feeling inspiration and hope when they hear about how people are able to change to healthy behaviors
- **Self-Reevaluation:** realizing that the healthy behavior is an important part of who they are and want to be



# THE TRANSTHEORETICAL MODEL PROCESSES OF CHANGE – CONT...

- **Environmental Reevaluation:** realizing how their unhealthy behavior affects others and how they could have more positive effects by changing
- **Social Liberation:** realizing that society is more supportive of the healthy behavior
- **Self-Liberation:** believing in one's ability to change and making commitments and recommitments to act on that belief
- **Helping Relationships:** finding people who are supportive of their change





# THE TRANSTHEORETICAL MODEL PROCESSES OF CHANGE – CONT...

- **Counter-Conditioning:** substituting healthy ways of acting and thinking for unhealthy ways
- **Reinforcement Management:** increasing the rewards that come from positive behavior and reducing those that come from negative behavior
- **Stimulus Control:** using reminders and cues that encourage healthy behavior as substitutes for those that encourage the unhealthy behavior



# WHY ARE WE DISCUSSING IT?

- Many are curious
- It was used in the DPP Look AHEAD studies
- Helps give us a framework for discussion of participants, and what we can do to help



# A Quick Conversation



# THE STAGES PROCHASKA & DICLEMENTE (1992)



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



# PRECONTEMPLATION

- Individual is unaware, unable, unwilling to change. No intent to change. Problem isn't even on radar.
- Behaviors:
  - ✓ argue, interrupt, deny, ignore, avoid reading, talking, or thinking about the behavior, etc.
- Individual can be seen as resistant, unmotivated, avoidant, grouchy



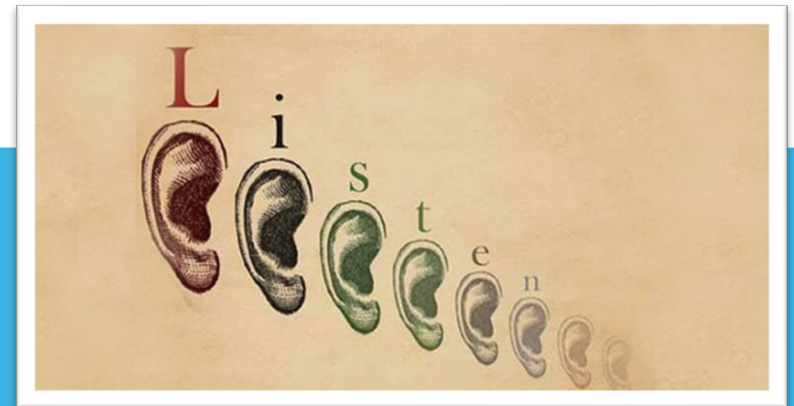
# WHAT PRECONTEMPLATION SOUNDS LIKE

- “No, my weight isn’t a problem.”
- “I supposed you’re going to want to tell me I’m fat.”
- “I just thought you were giving away free stuff, I don’t want my finger pricked!”



# OUR ROLE DURING PRECONTEMPLATION

- Establish rapport
- Determine why the client has come to you
- Give information on risks, pros & cons of use
- Acknowledge the client's thoughts, feelings, fears, and concerns
- Keep the interview informal
- Listen Well



# CONTEMPLATION

- Individual is ambivalent or uncertain about behavior change
- Behaviors:
  - ✓ open to conversation, will “yea but” if you get too excited too soon, can find many reasons to not make change
- Individual is still iffy, change is on radar, but the map for change hasn't been drawn yet



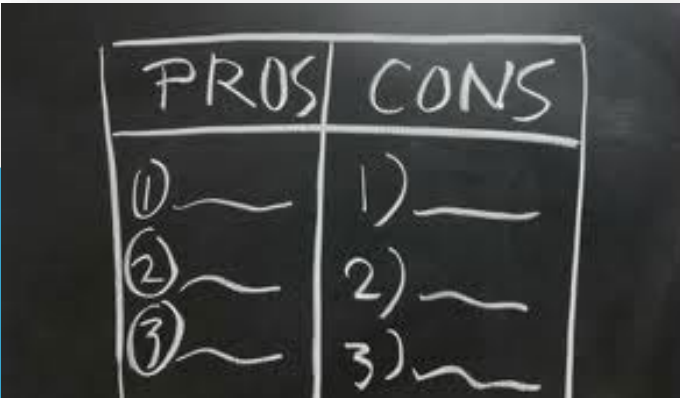
# WHAT CONTEMPLATION SOUNDS LIKE

- “Yea, maybe.”
- “I’ve been thinking about that.”
- “That’s a good idea, but I’ve got too much going on right now.”
- “Yes, but there’s things I need to do first.”



# OUR ROLE DURING CONTEMPLATION

- Discuss & weigh pros/cons of behavior change
- Emphasize free choice & responsibility
- Elicit self-motivational statements
- Motivational Interviewing is effective here



PROS	CONS
① ~	1) ~
② ~	2) ~
③ ~	3) ~



# PREPARATION

- Individual shifts from thinking about behavior change to planning initial steps
- Behaviors:
  - ✓ Individual asks questions, considers options, demonstrates openness in considering behavior change
- Individual may be seen as excited, or ready to move, “coachable”



# WHAT PREPARATION SOUNDS LIKE

- “How do I start?”
- “What do I need to do?”
- “How can I find out more about...”



# OUR ROLE DURING PREPARATION

- Support efforts to change
- Clarify goals & identify successful strategies
- Structure plan of action collaboratively based on history and willingness, keeping participant/client very involved
- Set SMART Goals (Specific, Measurable, Attainable, Relevant, Timely)
- Motivational Interviewing is effective here



# ACTION

- Individual demonstrates like to trying new exercises or different foods
- Behaviors:
  - ✓ Individual is engaged in the process and has begun activities related to their goals
- Individual is viewed as becoming successful, engaged in the program. Ex: Losing weight, exercising etc. Workin it.



# WHAT ACTION SOUNDS LIKE

- “I’ve been walking all week.”
- “I’m meeting my friends at Zumba class!”
- “Can we walk together?”
- “Can we walk after class?”
- “Are we doing some new recipes in class?”



# OUR ROLE DURING ACTION

- 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
- Motivational Interviewing effective here
- Its easy for them to “slip”




# MAINTENANCE

- Individual actively sustains behaviors, part of their regular routine
- Behaviors:
  - ✓ New Behaviors are a part of lifestyle, ongoing ways to find time for new behaviors, seeks ways to keep behavior change challenging and interesting
- Individual can maintain ongoing behavior change with “check ins” when necessary



# WHAT MAINTENANCE SOUNDS LIKE

- “I’ve met my weight goals.”
  - “I’m getting tired of running.”
  - “I’m getting my friends and family involved.”
  - “I need ways to stay motivated now that I’ve met my goals.”
- 

# OUR ROLE DURING MAINTENANCE

- Support and affirm changes
- Rehearse new coping strategies and countermeasures to triggers
- Review personal growth long-term goals
- Encourage participants to help others



# SUMMARY

- Change is a complicated process
- *Stages of Change* give us a template for understanding the change process
- We use unique tools for different stages
- Maintain relationship throughout the process
- Motivational Interviewing is valuable from *Contemplation* to *Maintenance*

**You're braver than you believe,  
stronger than you seem, and  
smarter than you think.**

- Christopher Robin



THANK YOU FOR ATTENDING

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