

Module 12, Lesson 1 Handout:

Stages of Changes

Change is hard. Being able to assess your clients' readiness to change can help you overcome huge barriers in your counseling, and appropriately counsel your clients by meeting them where they are at. One of the best tools to determine where your client is at with readiness to change is the Transtheoretical Model of Change, sometimes called the Stages of Change model, created by social scientists Prochaska and DiClemente in the early 1980s. The reason this model is so successful is because it focuses on internal intentional change, rather than change imposed by outside forces. Let's take a look at their theory on change:

**As a tip, try to avoid the word change as much as possible when you're working with clients, as this might lead to resistance. The idea of change may leave people feeling like they're losing control over their lives and change goes against the neural pathways that have been hardwired to match our current habits. Focus on what to actually *do* rather than what clients are giving up or changing.

1. Precontemplation

You may have someone who is just starting to consider making a behavior change. In the precontemplation stage, your client may come to you having noticed that she's put on weight, her clothing isn't fitting and maybe even her doctor or a friend has mentioned that she should lose a few pounds. The precontemplation client is going to present to you and say something like: "I'm here because my doctor says I need to lose some weight" or "I notice I'm heavier but I don't know if I want to give up my French fries." In the precontemplation stage, your client may not see the benefits of losing weight yet and she may feel like there's nothing wrong at all. Precontemplation is sometimes simply denial.

Research suggests that among at risk populations who would benefit from behavior change, 40% of people are in the precontemplation stage, so you're bound to see clients who are in precontemplation. This can be challenging. Your role here is to help the client see the benefits of making changes and move the client to contemplation. Motivational interviewing techniques - that is, asking key open ended questions about the client's health and lifestyle and using reflective listening to repeat back what the client has said - have been found to be most effective. Additionally, approaching the client with empathy rather than coming at them in a confrontational way is shown to be a predictor of future success in change. Avoid jumping in and providing advice that may come off as judgmental. Instead gently point out discrepancies between their goals and what they are

currently doing. Throughout these first phases, really assess what exactly motivates the client so you can speak to it in your work.

2. Contemplation

In contemplation, your client sees that there's a problem. She may notice that her clothing is tight and feel uncomfortable with extra weight. She's going to say things to you, like: "My jeans are tight and I just bought a dress a size up from usual. I'm thinking about losing some weight." Or, maybe she's saying, "I know I can't afford to be overweight, my parents both have diabetes." Basically, she addresses there's an issue but isn't quite sure if she's ready or wants to do something about it.

Another 40% of at risk people are in the contemplation stage.

Now that she sees there's something to change, your role is to help her find the motivation to do so and to give her the confidence she needs to get started. The reality is, some clients may spend years in the contemplation stage. You'll hear a lot of "yes, but" statements here and a lot of excuses. Ask open ended questions targeted at identifying possible barriers and coming up with solutions for them. Ask about strategies that might have been helpful in the past, and see if there's a way to build on those. You'll also learn what hasn't been successful for them and can discuss what to do differently in the future.

3. Preparation

The remaining 20% of at risk people have reached the preparation stage. In the preparation phase, the client may be coming to you already thinking about what she needs to do to lose the weight before she even steps into your office. She's gathering intel, and she may be chatting about it with others. She may just be gathering info that she does nothing with, or she may take that knowledge to the next phase, which is the action phase.

As this client begins to test out new behaviors and shift into full action, continue to speak to their internal motivation. Is it to feel and look better in clothes? Is it so that they won't run out of breath playing with their kids? Is it to avoid the heart attack that killed a parent at an early age? Keep this client motivated to move into full action.

4. Action

In the action phase, your clients are doing the work. You'll see beautiful food journals. You'll get emails with clarification about what a serving size of oats is and follow up emails asking if avocados

count as a vegetable or a fat. In the action phase, your clients will say things like: “I’m setting a goal of getting greens in every day for lunch this week.” They’re excited, they’re happy and they’re doing the work. Continue to ask about successes and difficulties and provide feedback and praise to keep them on track. In the action phase, there are bound to be slip ups. Reassure the client that this is okay! Help the client see that one bad day doesn’t need to get in the way of lasting success so that they stick with these new behaviors and move into maintenance.

5. Maintenance

Maintenance is just what it sounds like. Your client gets so good at the action phase that it becomes second nature. People in the maintenance phase have met their goals and continue to flourish. They make statements like: “I usually switch between the yogurt and the eggs for breakfast. They’re really working for me.” Your sessions might start to become shorter because there’s simply less to talk about. Their new behaviors are truly beginning to become part of their identity.

6. Termination.

With the client in this phase, they’re so grounded and happy in their new behaviors that they aren’t missing their old behaviors at all. Clients in termination identify their new behaviors as who they are - this is an important step. And, they feel great about the behavior changes they have made. It’s great to have a client meet their goal and terminate. They won’t need you regularly anymore, but you’ve helped them change their lives. Once a client terminates, it’s good practice to still check in every six month or annually - just like you would at a doctor’s office - to ensure the client has stayed on track.

Note that while you can never go back to precontemplation, where ignorance is bliss, you can jump around in your readiness to change and go from being in the action phase back to the contemplation phase, for example. You’ll see that a lot. This does NOT mean failure! This is a totally normal part of human behavior. You don’t always have to move in the forward direction to be moving and making progress. Setbacks are part of the journey. Ideally, your client will learn from the setback right away but often it may take multiple times of experiencing the same setback to grow. Your job is to help your client address this. It’s all part of the process.