

Center for Evidence Based Practices @ Case Western Reserve University
Stages of Change/Treatment for Persons with Mental Illness and Substance Use

Stage of Change/Treatment	Description	Treatment Focus
<p align="center">Pre-contemplation</p>	<p>Engagement</p> <p>For: ___ Substance Use ___ Mental Illness</p> <p>“This is not me!”</p> <ul style="list-style-type: none"> • Unable to see a need for change OR does not have any desire make a change • Because of active symptoms, may not be able to determine the need or want for a change at this time • May or may not engage with staff 	<p align="center">Your Goal: Develop trust/rapport/therapeutic relationship</p> <ul style="list-style-type: none"> • Help the person get their basic needs met (food, clothing, finances, shelter, safety) • Begin to develop a rapport/regular contact with the person • Be curious yet sensitive, find out about this person’s story, perspective, and why they seem resistive to making change • Be accepting and non-judgmental • Understand what matters to the person • Invite to engagement activities and encourage peer supports that they are willing to try • Decrease the emotional distress by helping to reduce the symptoms, providing crisis intervention • Assessment
<p align="center">Contemplation</p>	<p>Early Persuasion</p> <p>For: ___ Substance Use ___ Mental Illness</p> <p>“Yes, but....”</p> <p>“I <u>may</u> have a problem”</p> <ul style="list-style-type: none"> • If living in the community: the individual continues to use the same amount of substances or has reduced substance use for less than 2 weeks • Has regular contacts with a team member • Beginning to discuss possibilities of considering a change and shows some interest in additional information/education on issues of mental health and/or substance use • Not committing to making a personal change though contemplating the possibility • Considering, curious about, or starting to participate in services (individual and/or group) • Limited hope and optimism • Poorly coping/ engaged, yet not self-directed 	<p align="center">Your Goal: Develop the patient’s awareness of issues. Increase the patient’s motivation to make changes.</p> <ul style="list-style-type: none"> • Explore what matters to the person as related to their values & needs • Assesses confidence in their ability to make positive changes • Provide encouragement and support; instill hope and a sense of possibility and to rebuild a positive self-image • Look at the pros and cons of change (pay off matrix /decisional balance) • Use Motivational interviewing techniques to promote positive interactions: <ul style="list-style-type: none"> ○ Listen with empathy/Evoke the client’s concerns and motivations/Develop discrepancy/Roll with resistance/Nurture hope and optimism through supporting self-efficacy ○ Open ended questions-Affirmation-Reflective listening-Summarize (OARS) ○ Elicit, explore, reflect, and reinforce their: Desire-Ability-Reasons-Need...to change • Invite participation in groups and/or other treatment services • Ongoing assessment • Offer to engage individual’s support network

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Preparation	<p>Late Persuasion</p> <p>For: ___ Substance Use ___ Mental Illness</p> <p>“I <u>probably</u> do have these problems and want to....”</p>	<ul style="list-style-type: none"> • If living in the community: the individual shows evidence of reduction in use for the past 2-4 weeks (fewer substances, smaller quantities, or both) • The client has regular contact with a team member • Has identified a need, desire, and commitment to make a change, yet unaware of what to do next • Communicating with the team about next steps; • Participates in services (individual and/or group) • Demonstrates increased awareness of symptoms and more willing to address impact on life, personal goals, values 	<p>Your Goal: Tip ambivalence toward healthy change/ Enhance motivation to change/Build Confidence</p> <ul style="list-style-type: none"> • Help them prioritize their needs and what it is that they most want or need to address • Seek input for <i>their</i> ideas to manage substance and/or mental illness • Develop discrepancy between their current behavior, and achieving personal goals • Elicit and reinforce change talk • Explore strengths and weaknesses regarding change and starting to work on developing skills for change • Assist them to explore groups and other treatment opportunities that they feel will assist them - show them the “menu” of available helping resources • Ask permission before providing information, advice, or options • Offer education to help them acquire a knowledge to inform decisions about mental health, substance use, medication, lifestyle • Invite and encourage client to try peer support groups (DRA, AA, NA, CA) • If individual was not previously willing to attend Persuasion Group or other groups, invite again
Action	<p>Early Active Treatment</p> <p>For: ___ Substance Use ___ Mental Illness</p> <p>“I <u>have</u> a problem and will...” “Change is possible...”</p>	<ul style="list-style-type: none"> • If living in the community: has reduced substance for more than the past month • Engaged in treatment • Openly and actively discussing and identifying personal recovery goals; participating in services (individual and/or group) • Practicing and applying skills 	<p>Your Goal: Help develop individual’s insight Help client develop and practice recovery skills Provide hope and encouragement</p> <ul style="list-style-type: none"> • Support recovery through skills building and knowledge development <ul style="list-style-type: none"> ○ Skills may include: social skills, communication, relaxation, identifying triggers and cues, refusal, leisure skills, managing unhelpful thoughts and emotions, managing cravings and symptoms, coping skills, etc • Develop a written recovery plan and develop Behavioral Health Advance Directives • Identify positive social supports • Continue to support use of medications known to be effective for MH symptoms and medications known to be effective for cravings & urges to use • Encourage and continue to provide hope for recovery • Refer to self-help support groups and peer support

Action	<p>Late Active Treatment</p> <p>For: ___ Substance Use ___ Mental Illness</p> <p>“I <u>have</u> a problem and will...” “Change is possible...”</p>	<ul style="list-style-type: none"> • If living in the community: has not used substances for past 1-5 months • Engaged in treatment • Actively participates in behaviors which develop or maintain recovery skills and supports • Openly and actively discussing and identifying personal recovery goals • Participating in groups & peer support groups • Practicing and applying learned skills • Shows a determined commitment to be well 	<p style="text-align: center;">Your Goal: Help develop individual's insight Help client develop and practice recovery skills Provide hope and encouragement</p> <ul style="list-style-type: none"> • Develop person's knowledge and skills to support recovery from co-occurring disorders through groups and in individual sessions • Encourage and continue to provide hope for recovery (e.g. support networks, personal interests, other meaningful life activities) • Anticipate unexpected obstacles; update recovery plan • Encourage ongoing use of formal and informal supports that will assist in recovery
Maintenance	<p>Relapse Prevention</p> <p>For: ___ Substance Use ___ Mental Illness</p> <p>“What next?”</p>	<ul style="list-style-type: none"> • If living in the community: has not used substances for past 6-12 months • Continues to actively participate in treatment groups, Peer Support groups, and other activities, applying learned skills and strategies • Engaged in recovery activities • Acknowledges the need to manage illness and maintain abstinence in order to sustain recovery • Continues to show a determined commitment to be well • Moving beyond the disabling power of the illness • Living a full and meaningful life, characterized by self-management of the illness, resilience and a positive sense of self 	<p style="text-align: center;">Your Goal: Help support lifestyle changes Provide positive feedback</p> <ul style="list-style-type: none"> • Enhance knowledge and skills to maintain dual recovery in the community • Groups provided as needed for enhancement in identified areas • Provide positive feedback on success; Encourage continued use and practice of learned skills and strategies for maintaining recovery • Explore future transition to lower level of care • Help the person trust in their own decision-making ability and take more and more responsibility for their life • Alumni activity

(February, 2012). Adapted from: the Substance Abuse Treatment Scale (SATS), Mueser *et al.* (1995).