**PROCHASKA AND DICLEMENTE PROCESSES OF CHANGE MODEL**

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**ABSTRACT**

This paper contains a summary of the steps or stages of the Prochaska and DiClemente processes of change model, how an addiction professional would intervene with the client at each stage and the challenges the addiction professional would have in each of the stages.

**THE PROCHASKA AND DICLEMENTE MODEL**

The Prochaska and DiClemente processes of change model is a framework that describes the different phases through which one progresses during health-related behavior change. The model consists of five or six stages, depending on whether relapse is considered a separate stage or not.

**THE FIRST FIVE STAGES OF PROCHASKA AND DICLEMENTE PROCESSES OF CHANGE MODEL**

1. **PrecontemplationStage**

The individual has no intention to change his or her behavior in the foreseeable future and may be unaware of the problem or its consequences.

1. **Contemplation Stage**

The individual is aware that a problem exists and seriously considers overcoming it, but has not yet made a commitment to take action.

1. **Preparation Stage**

The individual intends to take action in the immediate future (usually within the next month) and may have already taken some small steps toward change.

1. **Action Stage**

The individual implements specific strategies to modify his or her behavior and/or environment in order to overcome the problem.

1. **Maintenance Stage**

The individual sustains the changes made in the action stage and works to prevent relapse.

**INTERVENTIONS TAKEN BY AN ADDICTION PROFESSIONAL AT EACH OF THE PROCHASKA AND DICLEMENTE STAGES.**

1. **Precontemplation Stage**

The addiction professional would try to raise the client's awareness of the problem and its consequences, without being confrontational or judgmental. The professional would use motivational interviewing techniques, such as expressing empathy, developing discrepancy, rolling with resistance, and supporting self-efficacy. The professional would also provide information and feedback about the risks and benefits of the addictive behavior and the change process.

1. **Contemplation Stage**

The addiction professional would help the client weigh the pros and cons of changing and staying the same, and explore the barriers and facilitators to change. The professional would use motivational interviewing techniques, such as reflective listening, affirming, summarizing, and eliciting change talk. The professional would also help the client identify their values and goals, and how they align or conflict with their addictive behavior.

1. **Preparation Stage**

The addiction professional would assist the client in developing a realistic and specific plan of action, including setting a quit date, identifying coping strategies, seeking social support, and anticipating challenges and solutions. The professional would use motivational interviewing techniques, such as reinforcing commitment, negotiating a plan, offering options, and enhancing confidence. The professional would also provide education and skills training on how to implement the plan and cope with cravings and triggers.

1. **Action Stage**

The addiction professional would support the client in executing their plan of action and monitor their progress and outcomes. The professional would use motivational interviewing techniques, such as providing feedback, affirming strengths, troubleshooting problems, and reinforcing successes. The professional would also provide ongoing education and skills training on how to maintain the change and prevent relapse.

1. **Maintenance Stage**

The addiction professional would help the client consolidate their gains and sustain their change over time. The professional would use motivational interviewing techniques, such as reviewing goals, acknowledging efforts, celebrating achievements, and exploring new challenges. The professional would also provide relapse prevention strategies, such as identifying high-risk situations, coping with lapses, managing negative emotions, and seeking help when needed.

**CHALLENGES AN ADDICTION PROFESSIONAL WOULD HAVE IN EACH STAGE OF THE PROCHASKA AND DICLEMENTE PROCESSES OF CHANGE.**

1. **Precontemplation Stage**

The addiction professional may face resistance, denial, rationalization, or minimization from the client, who may not see the need or benefit of changing their addictive behavior. The professional may also have difficulty engaging the client in a collaborative and respectful relationship, especially if the client is coerced or mandated to seek treatment.

1. **Contemplation Stage**

The addiction professional may encounter ambivalence, procrastination, or fear from the client, who may be unsure or conflicted about changing their addictive behavior. The professional may also have difficulty balancing the client's autonomy and responsibility, especially if the client expects the professional to make decisions or provide solutions for them.

1. **Preparation Stage**

The addiction professional may face unrealistic expectations, overconfidence, or lack of commitment from the client, who may be eager to change their addictive behavior but not prepared for the challenges and sacrifices involved. The professional may also have difficulty helping the client develop a feasible and effective plan of action, especially if the client lacks the necessary skills, resources, or support to implement it.

1. **Action Stage**

The addiction professional may encounter setbacks, frustrations, or temptations from the client, who may struggle to maintain their change and cope with cravings and triggers. The professional may also have difficulty supporting the client's progress and outcomes, especially if the client experiences negative consequences or does not receive positive reinforcement for their change.

1. **Maintenance Stage**

The addiction professional may face complacency, boredom, or overgeneralization from the client, who may become overconfident or lose interest in their change and neglect their relapse prevention strategies. The professional may also have difficulty helping the client consolidate their gains and sustain their change over time, especially if the client faces new or unexpected challenges or stressors that threaten their recovery.

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