**Prochaska And Diclemente Change Model**

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**Diclemente And Prochaska Change Model**

 What is good only needs an improvement and not a change. Modification comes in when whatever is available is not either to our expectations or standard. Several theories have been put forward to discuss behavioural change. One such theory was put forward by Professor James O. Prochaska and Professor Carlo DiClemente in 1980 who explained human behavioural changes based on a theoretical model, (Expert Programme Management, EPM, 2022, 0:45)

According to programming mind (2015,0:39) in embracing change, we are trying to create a new habit. He goes a step further(2015, 1:06) to explain how alcoholism and depression were the main motivating factors for the scholars to initiate a study into human behaviour and how they (humans) can change them.

**Prochaska and DiClemente stages**

The stages of changes also known as Trans- theoretical model (EPM 2022,0:32) explains that people who use the stages of change model to approach change of behaviour are more successful than those who do not.

The stages are divided into six stages.However, only five will be discussed. Another item to be discussed will be how professionals can use each of these stages to attend to a client and finally talk on the challenges an addiction professional will encounter in each stage.

The model begins with precontemplation stage. “The defining characteristic of the Precontemplation stage is that individual is not seriously considering modifying the addictive behaviour in the foreseeable future” (C. DiClemente,2018 pg 147)

According to Programming Mind(2015,2:21), the person has a problem. This person at this stage is not even aware he/she has a problem. In addition this person is neither interested in taking responsibility nor interested in discussing his/her problem with anyone. In other words, he/she sees nothing wrong with their lifestyle and are not willing to change. A further input by EPM (2022,1:56), this is a stage where the concerned party has the following features : no intention of changing in the foreseeable future, a lack of belief that the current behaviour is damaging at this particular stage and also underestimate the benefits of changing while at the same time overestimating the cost of changing . According to Practical Psychology (2021,1:34),a person in this stage might months away from change, might not believe that taking action is worth their time and also downplay any convincing force that tries to persuade him/her to change. Therefore a shift in perspective is the key to getting to the next level. This stage needs one to be patient.

 Contemplation stage then follows. “certainly it is not unrealistic to expect the addicted individual to move quickly to action and stop the addictive behaviour with minimal urging pressure. However, it is not unrealistic to believe that he or she can begin to consider consequences and change” (C. DiClemente,2018, pg 155). Practical Psychology(2021,2:36), the stage begins by a person beginning by thinking about the consequences of their action. One can stay in this stage for a very long time. They are aware that their behaviour hurts both themselves and the people around them. They are afraid of change because they think change is like giving up their identity. Programming mind (2015, 3:03) continues by saying that this stage is accompanied by procrastination.

The third stage is Preparation. Programming Mind (2015, 3:20), states that individuals in this stage intends to take action. They know that the change is both good and possible. They become serious about change and even go a step further in contacting individuals who were in a similar situation. EPM (2022, 3:45) , narrates that this stage is coupled with investigating how to proceed to the next stage. The subject may begin by making small changes. The person begins by doing things such as: committing to start date, writing down your goals, creating a plan and even joining support groups. In addition, Practical Psychology (2021,4:06), explains that small changes is part of changes. The subject is ready to make changes. The subject understands the benefits of chang e and want to move forward. It also considers next plan of action should the current plan fails.

The fourth stage is Action. It begins with execution of your plans,(EPM,2022, 4:34 ). At this stage , momentum for change is built and small changes that are made daily get easier and make great difference. To put more weight, Practical Psychology (2021,6:12), says that this stage is accompanied by multiple obstacles and it takes 3-6 months.

The final stage is Maintenance, according to Programming Mind (2015,4:12), maintenance entails committing to your current lifestyle. Practical Psychology goes a step further by warning that a relapse is still possible and the more honest you are to yourself more easier it is to recover from a relapse when it happens. However, the subject is confident of his/her ability to stick to their focus. He further informs that temptations are there but you must have plans to avoid them.

***Application of the DiClemente and Prochaska Model of Change to Deal with Addiction***

“Addictions have plagued society throughout history, as is evident from Greco-Roman philosophers’ call for moderation and condemnation of bacchanalian excesses of our 21st century preoccupation with alcohol,drugs, food,sex , and gambling” (C. DiClemente , 2018, pg 3)

As stated , precontemplation is a period of denial. So the professional has to start by ensuring that the client come to terms with the fact that he/she needs helps. It begins by being showing empathy. “If you want to have safe and addiction free or at least lower level addiction workplace or school…….. Research shows that the best way to get people help is through compassion and empathy and support and not absolutely tough love” (M. Szalavitz, 2019 ,1:48). These are likely to listen to you if they consider you a friend. Once they realize they need help. Exposing them media such as magazines can make them aware of the danger they are facing (Dr. W Guess,2015, 1:10). According to Dr. D.Snipes (2018, 7:00),it can also be done by providing information, materials or motivational interviewing linking to their current behaviour or issues. Also rekindle the successes and hope they have ever had in the past. In contemplation stage Dr.D.Snipes (2018,10:31) they have seen the problem and are not ready to change. Therefore there is a need to increase their awareness on the consequences of the current problem. Help to address anxiety and grief about change because they are going to give up a big part of their lives. In preparation(2018,13:59) the client is inclined towards a change and the professional has the responsibility of helping the client identify the benefits of treatment and also help them address the drawbacks that arises during this time. They also have to identify and address the fears and apprehensions about treatments. You can also give them a list of treatment available. Also identify any factor that might hinder the intended change. You can also get social support for the client to help him/her in recovery process. In action (2018,19:23) , encourage them to chose strategy for change and pursue it. There is a need to modify their environment and habits. Professional needs to help the client address the cases related to withdrawal and change of environment. They should also be encouraged to evaluate their self–image. Also identify them identify triggers that make them relapse e.g holidays, parties etc. Also help them identify obstacles to change and the solutions. Lastly, in maintenance (2018,23:41), there is a need to sustain the gains. Make them self aware of the triggers and how to handle them. Help them be aware vulnerabilities and how to avoid. Educate them on relapses and how to deal with them. Review problems which came up during treatment and were not addressed and help the client have a plan on how to deal with them.

**Challenges Met in Each Stage.**

In this section we are going to discuss the possible challenges as discussed by Dr. D.Snipes in each stage of the model. In precontemplation , Dr. Snipes (2018, 6:15) a person is not even aware that he/she has a problem. What this could mean is that the person might not see the need to get help. She goes further explain that some may be reluctant to give up these habits, some are rebellious because they think giving up an addiction will make them lose control while others will be resigned because they had tried it before and it did not work. All these present problems to the professional. The second phase according to Dr. Snipes (2018,12:12) ,is accompanied by grief and anxiety. Grief arises from the client envisioning giving up an addiction while anxiety could be as a result of the client attempting a change in the past that did not materialize. In the next stageDr. Snipes (2018,14:48), discusses fear and apprehension of the client. Some might fear being locked up or maybe loss of control. The treatment option available might also be a problem since some clients might not be comfortable with some options. There could be other barriers to change such as being next to people who are still under addiction. In the fourth stage, she explains (2018,20:26),the client maybe faced by challenges related to withdrawal and change of environment. The client might be having cravings that might make relapse possible. There could be some triggers such as adverts that makes the client want to relapse. In maintenance stage, (2018,24:39), one of the major challenge that might make change difficult is the triggers. There could be relapsing of addiction and mental disorders. The challenges above are client centred because any drawback by the client is a major challenge to the health professional.

Conclusion

Prochaska and DiClemente Model of Change is a major breakthrough in the field of Health that has several people to combat their addiction problems. The entire process is considered cyclic. It is not as smooth as it is but it has achieved results that has changed lives of clients all over the world. It has its limitations. However, in combination with other methods it will produce efficacious and tremendous results.

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