



Regrounding Our Response: **The Stages of Change**

Anastasia Edmonston, MS CRC
Coordinator
Traumatic Brain Injury Partner Grant
Behavioral Health Administration

Jess Nesbitt, CBIS
Provider Partnership Specialist
Center for Harm Reduction Services at
Maryland Department of Health



What is Regrounding Our Response?

- The Center for Harm Reduction Services Regrounding Our Response initiative supports a diverse network of 100+ Master Presenters across the state trained in 5 core concepts.
- Each concept provides the foundation to address stigma and common misunderstandings about substance use.
- The statewide training network aims to reduce stigma and raise awareness about evidence-based approaches to improve our response to the overdose crisis in Maryland.

Learning Objectives & Time Allocation

- Understand the burden of change
- Understanding how behavior change happens
- Understand how harm reduction strategies keep people safe, build self-efficacy, and support the change process
- Learn how to support people through the process of change

Stages of Change: Learning Objectives

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8 Reasons Why Change Is Hard

1. Negative Emotional Motivation
2. All or None Thinking
3. Eating the Elephant All at Once
4. Neglecting the Right Tools
5. Trying to Change too Much at Once
6. Underestimating the Change Process
7. Forgetting Failure is Given
8. Not Making a Commitment to Change

Change is hard at first,
messy in the middle and
gorgeous at the end.

- Robin Sharma



Barriers to Drug Use Behavior Change

147 patients in urban United States Community Health Centers who misused drugs, **but did not meet criteria for drug dependence**, received a brief intervention. Data gathered was analyzed to identify barriers patients believed inhibited drug use behavior change - 6 major reasons emerged:

Needing drugs to alleviate mental or emotional distress	72 (49.0%)
Proximity to people or places associated with drug use	61 (41.5%)
Belief that drug use enhances quality of life or functioning	52 (35.4%)
Needing drugs to alleviate physical pain or discomfort	40 (27.2%)
Drug use being habitual/fearing consequences of stopping drug use	30 (20.4%)
Drug use hard to stop due to challenges associated with poverty, homelessness	19 (12.9%)

OUR RESPONSE DSM-5 Substance Use Disorder (SUD) Diagnostic Criteria

- Taking the substance in larger amounts or for longer than you're meant to.
- Wanting to cut down or stop using the substance but not managing to.
- Spending a lot of time getting, using, or recovering from use of the substance.
- Cravings and urges to use the substance.
- Not managing to do what you should at work, home, or school because of substance use.
- Continuing to use, even when it causes problems in relationships.
- Giving up important social, occupational, or recreational activities because of substance use.
- Using substances again and again, even when it puts you in danger.
- Continuing to use, even when you know you have a physical or psychological problem that could have been caused or made worse by the substance.
- Needing more of the substance to get the effect you want (tolerance).
- Development of withdrawal symptoms, which can be relieved by taking more of the substance.

****Tolerance and withdrawal alone do not result in an SUD diagnosis***

****9 of 11 criteria relate to not responding to negative consequences***

Substance Use Disorder & Change

Recovery from substance use disorders requires an *intentional* change process:

- Marked by personal decisions and choices
- Influenced at various points by many biological, psychological, and social factors
- Follows a common path - marked by a set of tasks that must be completed to move forward



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Motivation and the Change Process

- People are **NOT** unmotivated!
- Rather, they are either...
 - Motivated to engage in behaviors that may be harmful and problematic
 - OR**
 - Not ready to begin behaviors that may be helpful

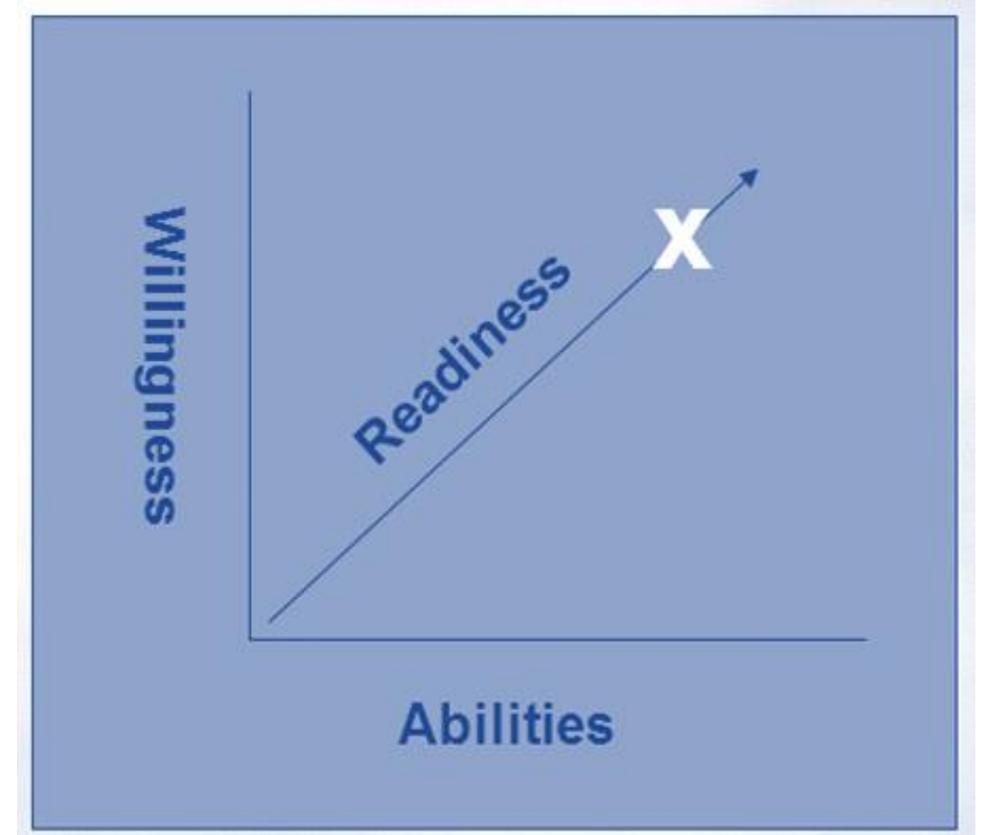
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Understanding Intentional Behavior Change

- People change voluntarily only when:
 - They become interested in or concerned about the need for change
 - They become convinced that the change is in their best interest or will benefit them more than cost them
 - They organize a plan of action they are committed to implementing
 - They take the actions that are necessary to make the change and sustain the change

Recipe for Successful Change: Ready, Willing & Able

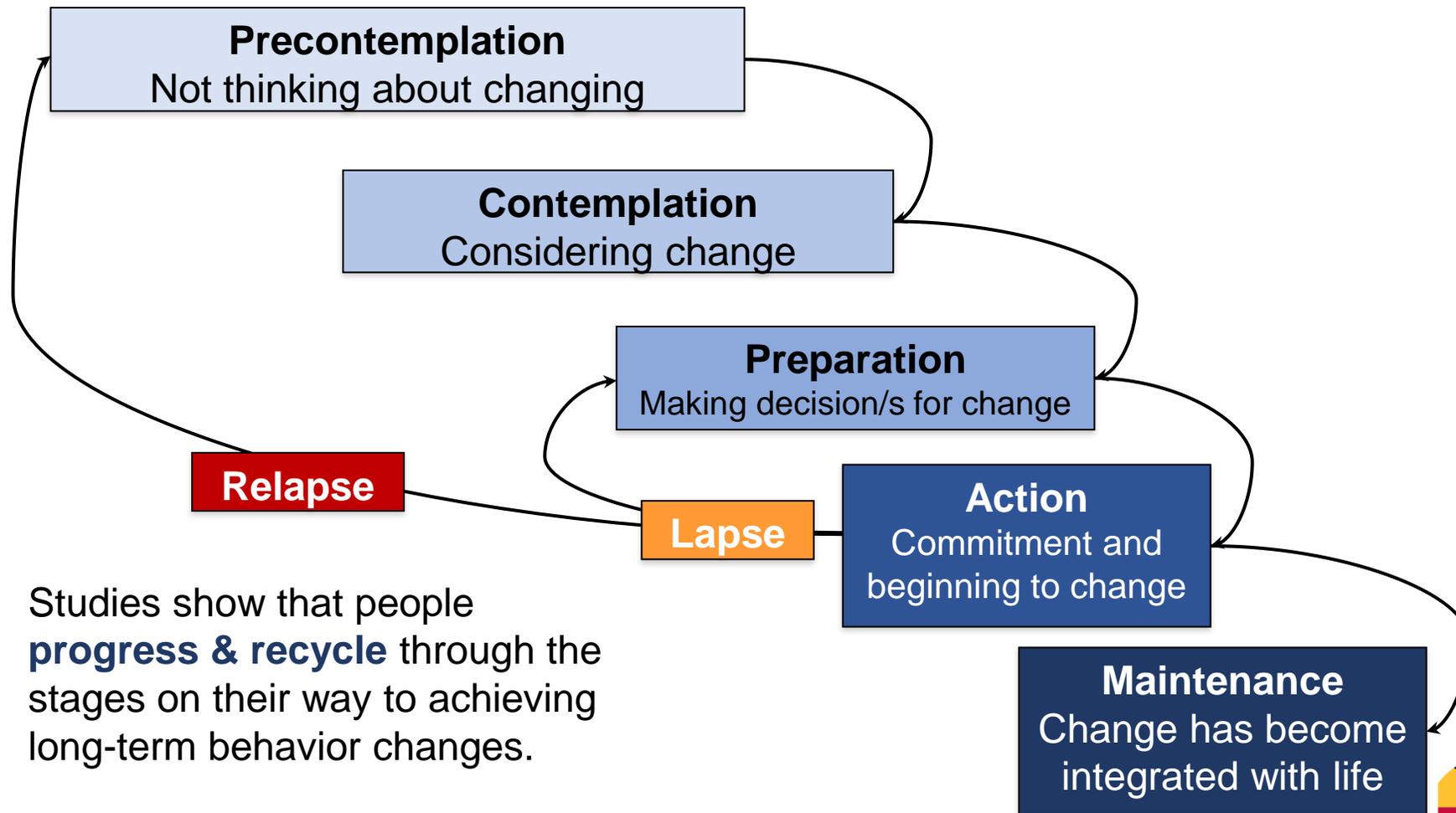
- Successful intentional behavior change happens when one is...
 - **Ready:** Sufficiently motivated to change in the near future
 - **Willing:** Has made a firm personal decision to change
 - **Able:** Believes in their ability to change / that they have what they need in order to make a change



“Change is a process, not an event.” - James Prochaska

- Major behavior changes don't happen overnight!
- The process of change can be thought of as moving through different stages of change that begin before a person decides to make a change.
- Each stage represents important tasks that the person needs to accomplish in order to successfully change.

The Stages of Change Model



Studies show that people **progress & recycle** through the stages on their way to achieving long-term behavior changes.

Key Tasks for Each Stage

STAGES	KEY TASKS
<p>Precontemplation</p> <ul style="list-style-type: none"> ◦ Not interested in change 	<p>Increase interest and concern</p>
<p>Contemplation</p> <ul style="list-style-type: none"> ◦ Considering change 	<p>Risk-reward analysis and decision making</p>
<p>Preparation</p> <ul style="list-style-type: none"> ◦ Preparing for change 	<p>Commitment and creating an effective/acceptable plan</p>
<p>Action</p> <ul style="list-style-type: none"> ◦ Initial change 	<p>Implementation of plan and revision as needed</p>
<p>Maintenance</p> <ul style="list-style-type: none"> ◦ Sustained change 	<p>Integrating change into lifestyle</p>

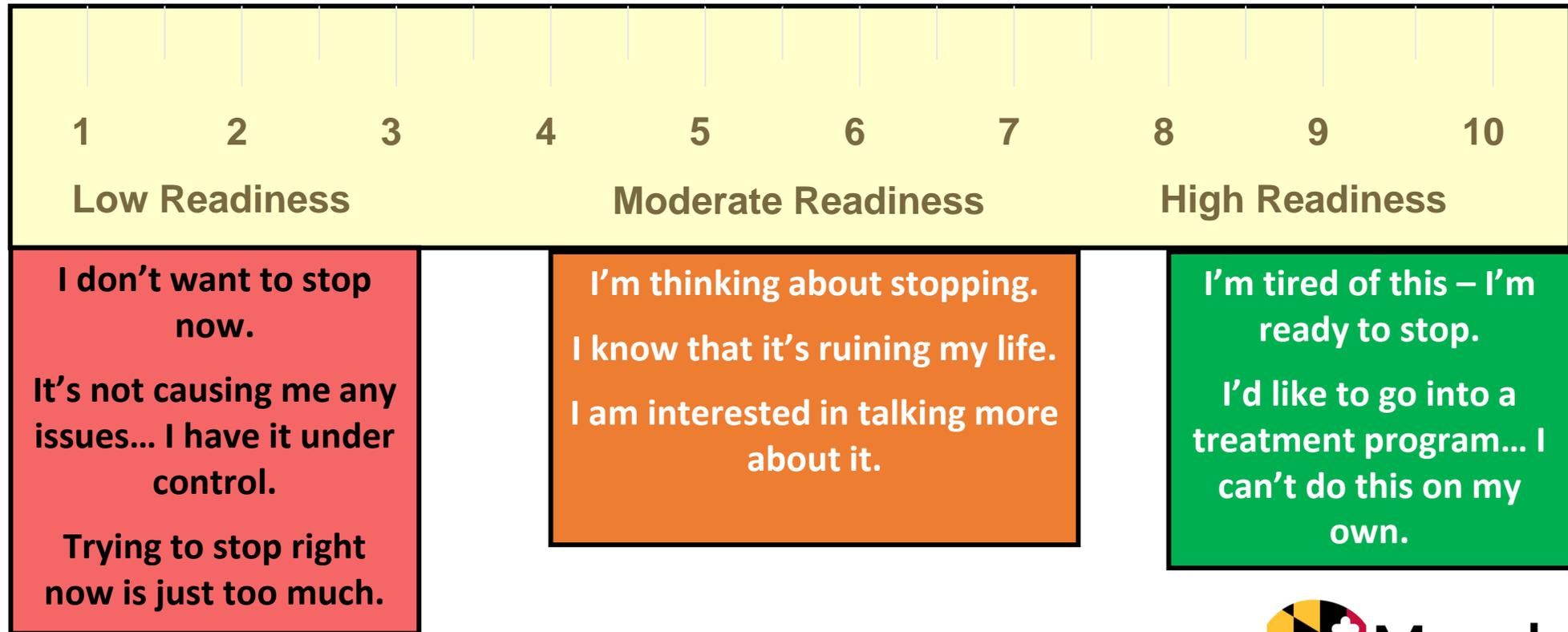
See Handout for details

Readiness for Change is Behavior Specific

- Readiness is **behavior specific**
- One key behavioral goal (e.g., changing alcohol use; weight loss) involves important behaviors related to that goal:
 - Cutting down vs. Abstaining
 - Dietary change vs. Exercise
- Broad change goals involves the process of changing multiple behaviors:

Understanding Stage of Change Using The Readiness Ruler

On a scale of 1 to 10, with 10 being very ready, how ready are you to stop using heroin?



Using the Readiness Ruler to Enhance Motivation



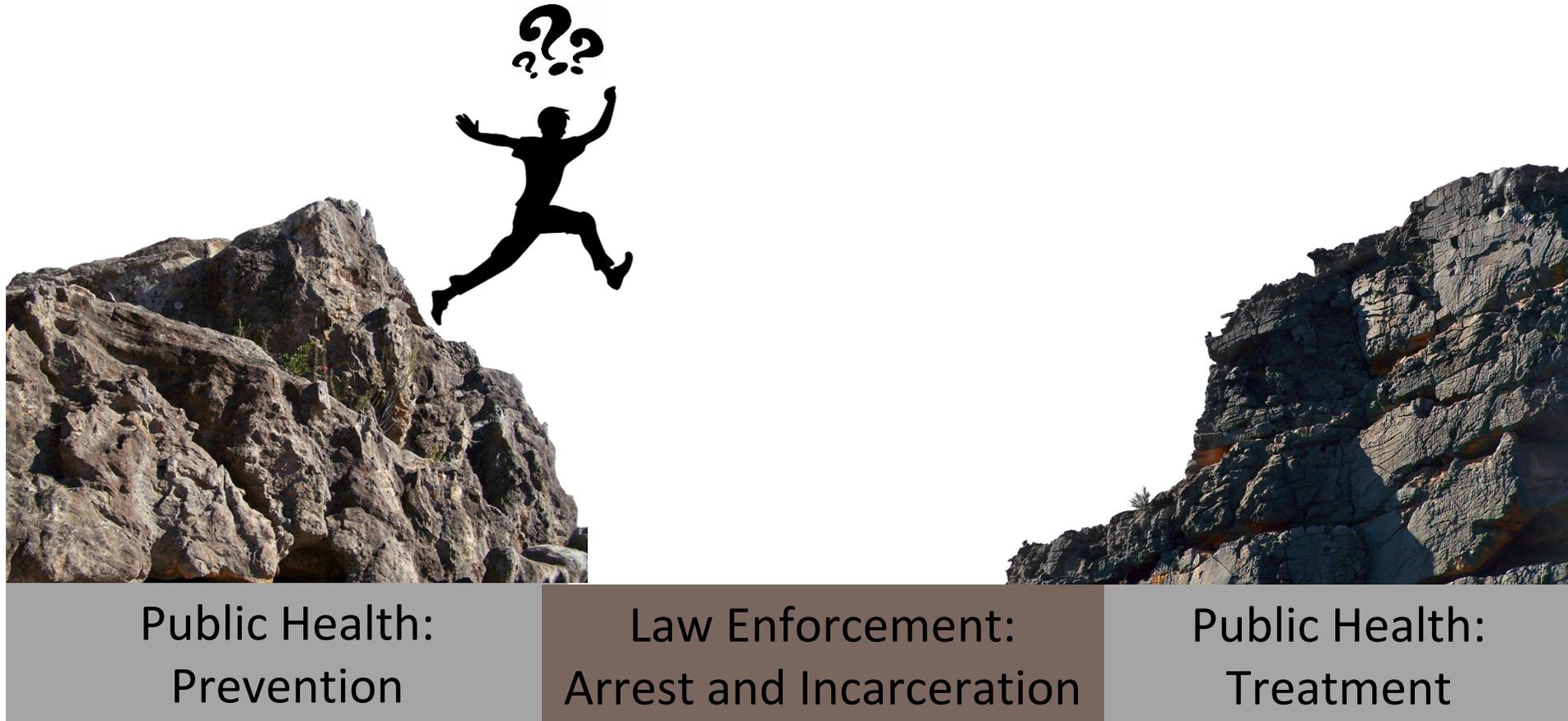
“On a scale of 1 to 10, with 10 being very ready, how ready are you to stop using heroin?”

- 6 - 10** Support confidence & address barriers to change by asking what would move them to a higher number.
- 2 - 5** Elicit change talk by asking why they didn't say a lower number.
- 1** Offer a reflection and listen with empathy.

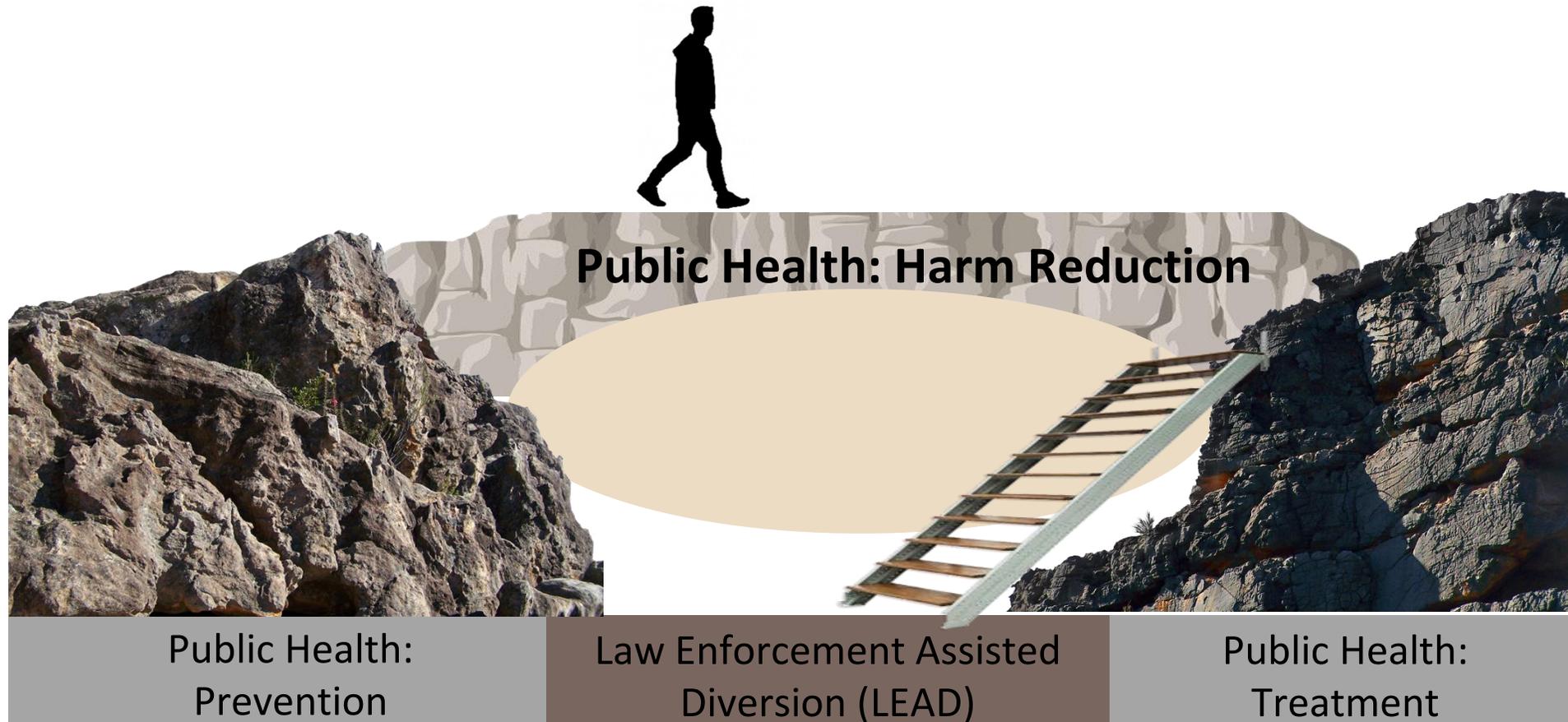
Stages of Change: Learning Objectives

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Current Landscape for People Who Use Drugs



Reimagined Landscape for People Who Use Drugs



What is harm reduction?

Harm reduction is a set of practical, public health strategies designed to reduce the negative consequences of drug use and promote healthy individuals and communities.

It is also *“a movement for social justice build on a belief in, and respect for, the rights of people who use drugs.”* - [Harm Reduction Coalition](#)

What does harm reduction look like in practice?

- Provision of services to people who are actively using drugs, without the expectation that they stop using drugs
- Non-judgmental, non-stigmatizing engagement of people who use drugs
- Acknowledgement of the harms associated with drug use while presenting accurate and complete information about ways to reduce these harms as much as possible.

What does harm reduction look like in practice?

- *An attitude of treating with respect and dignity*
- 911 Good Samaritan Policies
- Targeted naloxone distribution
- Medications for Addiction Treatment (MAT)
- Peer support
- Case management and resource coordination
- Focus of being “Navigators”, not “Fixers”

“Opioid Use among Individuals with TBI, a Perfect Storm?” summary of the research

- Those who misused substances before their injuries are **considerably** more likely misuse substances after injury compared with prior non-users of drugs
- It is estimated that 10-20% of individuals develop new-onset substance misuse post injury
- TBI often results in headaches & orthopedic injuries leading to prescriptions for opioids-**70-80% of all patients with TBI are discharged with a prescription for opioids**
- TBI Model Systems study indicated that individuals living with a history of TBI were 10x’s more likely to die from accidental poisoning, with 90% related to drug overdose (67% narcotics, 14% psychostimulants, 8% alcohol)

Sources: (2020) .Adapted from Adams, Rachael Sayko., Corrigan, John D., and Dams-O'Connor. J. Neurotrauma.37:211-216.

<https://acl.gov/sites/default/files/news%202018-05/20180502NIDILRRROpioidRFIFindings.pdf>

Harm Reduction through a Brain Injury Informed Lens

- Shame and marginalization may complicate the development of a trusting therapeutic relationship-brain injury professionals need to education themselves on best practices related to harm reduction
- Develop safety plans with the individual and their supporters to provide concrete, practical steps to prioritize safety by applying brain injury informed cognitive and behavioral interventions

Source: Adapted from Laura.Bartolomei-Hill NASHIA SOS presentation 2020

Harm Reduction through a Brain Injury Informed Lens

- The overdose crisis may increasingly bring people who use drugs/have history of involvement in criminal justice system into brain injury services
- Recognize the barriers that criminalization of drugs may impose upon individuals engaged in your clinical programs, including access to care
- Recognize that a vital component of the delivery of holistic brain injury services requires that programs and staff are familiar with common mental health and substance use related co-occurring conditions

Source: Adapted from Laura.Bartolomei-Hill NASHIA SOS presentation 2020

Sample safety plan – Staying safe in a brain injury informed way

Source: Adapted from Laura.Bartolomei-Hill NASHIA SOS presentation 2020

Risks

Using after a period of abstinence (due to relapse or exit from a hospital or correctional institution)

Unknown potency/quality of product due to fentanyl or other reason (potentially more risk during the pandemic)

Mixing substances - mixing opioids with benzodiazepines (benzos) can increase overdose risk

Using alone

History of overdose

Possible Interventions

Start Low, Go Slow! Use a test shot or dose to gauge tolerance

Fentanyl test strips, familiarity with seller, Using smaller amounts first when unsure

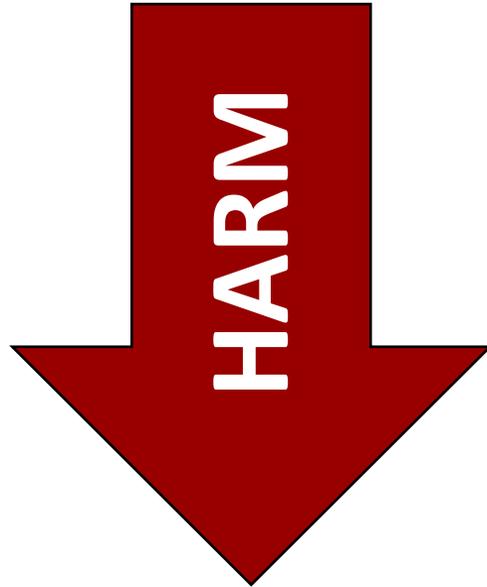
Understand how the substances interact and use one substance at a time

Don't lock the door, make sure people around have naloxone, notify someone when using

Screen for mental health and problematic substance use and link to services



Harm Reduction: an evidence-based approach



- Reduces overdose deaths (Seal et al., 2005; Tobin et al., 2009)
- Increases entry into drug treatment (Hagan et al., 2009; Stratthdee et al., 1999)
- Reduces prevalence of infectious diseases (Des Jarlais et al., 2014; Institute of Medicine, 2017; van den Berg et al., 2007; Wodak & Cooney, 2006; Wodak & Maher, 2010)

Benefits of harm reduction

Harm Reduction programs can:

- Establish trust between people who use drugs and service providers
- Make it easier for people who use to seek support when they are ready
- Reduce the costs and harms related to using
- Promote positive changes
- Helps you meet people where they're at; it's a person-centered approach



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How can we use this model?

- Identify Stages of Change and understand implications of being in each stage
- Focus on the tasks of these stages and what you can do when you encounter individuals who use substances
- Consider how to keep people safe during the Pre-Action Stages (**Harm Reduction**)



How and Why People Stay in Precontemplation

- **Reveling:** *“I like it the way it is.”*
- **Reluctant:** *“Not now... not ever.”*
- **Rebellious:** *“It’s my life... mind your own business.”*
- **Resigned:** *“The damage is done...there’s no use.”*
(Hopeless; Helpless)
- **Rationalizing:** *“At least I’m not doing...XYZ.”*
(Harm minimization)

Precontemplation: Key Issues and Considerations

STARTING A NEW BEHAVIOR

- For initiation of health-promoting behaviors, promoting experimentation (just try it out!) may help move people along in the process of change.
- Make the behavior seem attractive, something you'd like to try.

MOVING TOWARD RECOVERY

- Confrontation breeds **RESISTANCE**.
- Education is often insufficient, Motivational Enhancement is needed
- Smaller versus larger goals: Cutting Down vs. Quitting

Supporting People in Precontemplation

→ *Not Interested in Change Right Now*

- Encourage them to start thinking about change
- Be sure to emphasize that it is **their** choice
- Ask open-ended questions
- Assist them in identifying and emphasizing possible benefits of change
- Promote **Harm Reduction** strategies

Contemplation Tasks and Goals

- **CONTEMPLATION** – The stage where the individual examines the current pattern of behavior and the potential for change in a risk – reward analysis.
- **TASKS:**
 - Analyzing pros and cons of the current behavior pattern and of the costs and benefits of change
 - Decision-making
- **GOAL:** A considered evaluation that leads to a decision to change.

Supporting People in Contemplation

→ *Ambivalent About Making A Change*

- Help support them in making a decision
- Explore important reasons for change
- Assist them in identifying their most important values
- Explore ambivalence and the pros and cons of change
- Encourage them to make the arguments for change
- With permission, share important information
- Support their self-efficacy and confidence
- Promote Harm Reduction strategies

Promoting Progression from Contemplation to Preparation

- Decide that the current behavior is problematic and needs changing
- The pros for change outweigh the cons
- Change is in my own best interest
- The future will be better if I make changes in these behaviors

Movement through Later Stages of Change

Motivating Movement through the Later Stages of Change

- Critical tasks of the later stages involve:
 - Commitment
 - Effective planning
 - Sustained implementation of the plan
 - Using behavioral skills
 - Sustaining change despite obstacles
 - Coping with slips and relapse



Preparation Tasks and Goals

- **PREPARATION** - The stage in which the individual makes a commitment to take action to change the behavior and develops a plan and strategy for change.
- **TASKS:** Increasing commitment and creating a change plan.
- **GOAL:** An action plan to be implemented in the near future.

Preparation: Key Issues and Considerations

STARTING A NEW BEHAVIOR

- Behavior becomes more frequent
- Expectations become more positive
- Openness and commitment to change increases
- Support for new behavior grows
- Plan around barriers

MOVING TOWARD RECOVERY

- Need an effective, acceptable, and accessible change plan
- Setting timelines for implementation
- Building commitment and confidence
- Developing and refining skills needed to implement plan

Supporting People in Preparation

→ *Planning for Change*

- Assist them in preparing well to make the change
- Help them develop an effective and acceptable plan
- Make it a collaborative plan - you cannot do it for them!
- Support the plan with your help and resources
- Encourage them to set a timeline or date to begin / make the change
- Help them to identify possible barriers and plan for overcoming these
- Continue promoting Harm Reduction strategies

Action Tasks and Goals

- **ACTION** – The stage in which the individual implements the plan, takes steps to change the current behavior pattern, and begins creating a new behavior pattern.
- **TASKS:**
 - Implementing strategies for change
 - Revising plan as needed
 - Sustaining commitment in face of difficulties
- **GOAL:** Successful action to change current pattern. New pattern established for a significant period of time (3 to 6 months).

Supporting People in Action

→ *Starting to Make the Change*

- Support the change and help spot possible problems in the plan
- Encourage them to reward themselves as they make strides
- Check in with them about any difficulties they are having
- Help them to revise the plan when needed
- Highlight when there is support for change
- Assist with breaking down barriers (ie - no transportation)
- Continue promoting **Harm Reduction** strategies

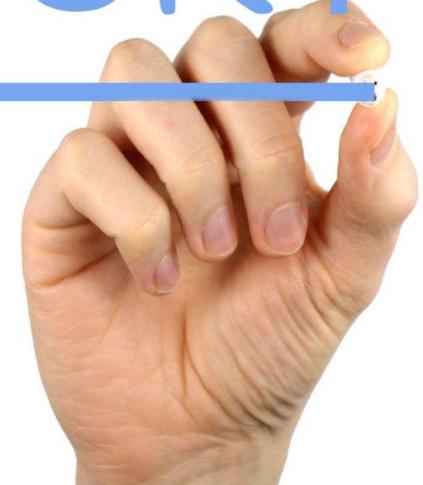
Maintenance Tasks and Goals

- **MAINTENANCE** – The stage where the new behavior pattern is sustained for an extended period of time and is consolidated into the lifestyle of the individual.
- **TASKS:**
 - sustaining change over time and across a wide range of situations
 - Avoiding going back to the old pattern of behavior
- **GOAL:** Long-term sustained change of the old pattern and establishment of a new pattern of behavior.

Maintenance: Key Issues and Considerations

- It's not over 'til it's over
- Support and reinforcement
- Availability of services or resources to address other life issues / areas of functioning
- Offering valued alternative sources of reinforcement
- The “change” becomes the new normal

SUPPORT



Supporting People in Maintenance

→ *Sustaining the Change Over Time*

- Support them in creating an environment that supports sustained change as much as possible
- Continue helping them to identify and emphasize benefits of change
- Support their self-efficacy and confidence
- Encourage them to watch out for events that can disrupt change
- Help them to address any remaining barriers
- Continue promoting Harm Reduction strategies

Maintaining Change Requires...

- Continued commitment
- Skills to implement the plan
- Long-term follow through
- Integrating new behaviors into lifestyle
- Creating a new behavioral norm



Review - Helping People Progress Through the Stages of Change

STAGES

Precontemplation

- Not interested in change

Contemplation

- Thinking about change

Preparation

- Preparing for change

Action

- Initial change

Maintenance

- Long-term change

TASKS OF THE HELPER

Increase person's awareness of risks, problems, and need for change

Encourage person to voice reasons for change & risks of not changing; help tip the balance of pros and cons

Help develop a personalized change plan

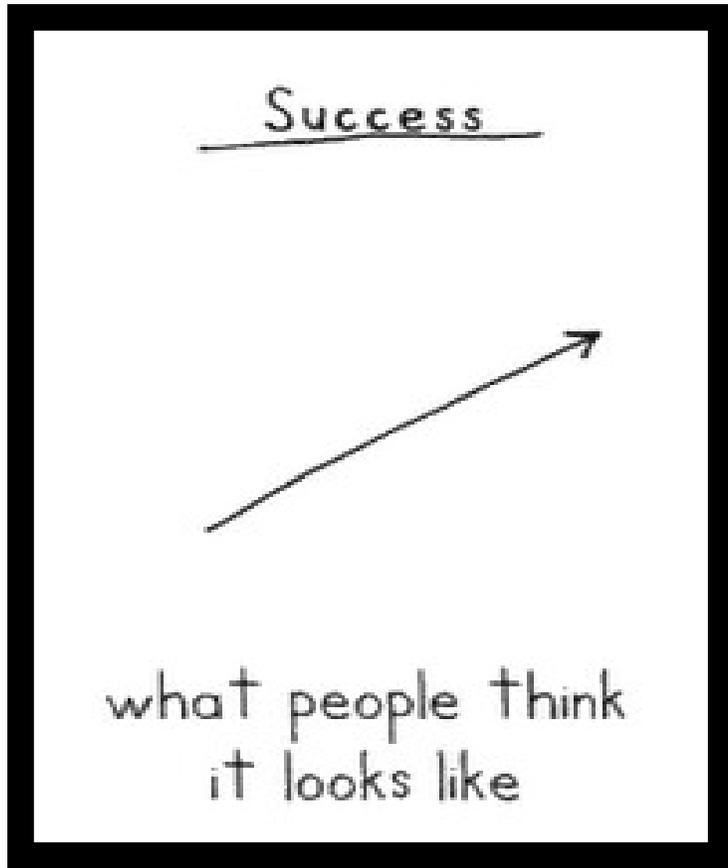
Help the person to develop relapse prevention strategies; Adjust change plan as needed

Help person identify strengths for long-term change; Provide support

How to support people through the process of change

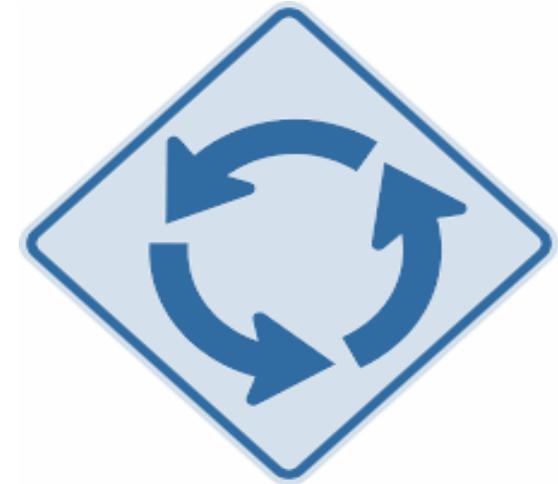
Relapse and Recycling

Change is NOT a Linear Process

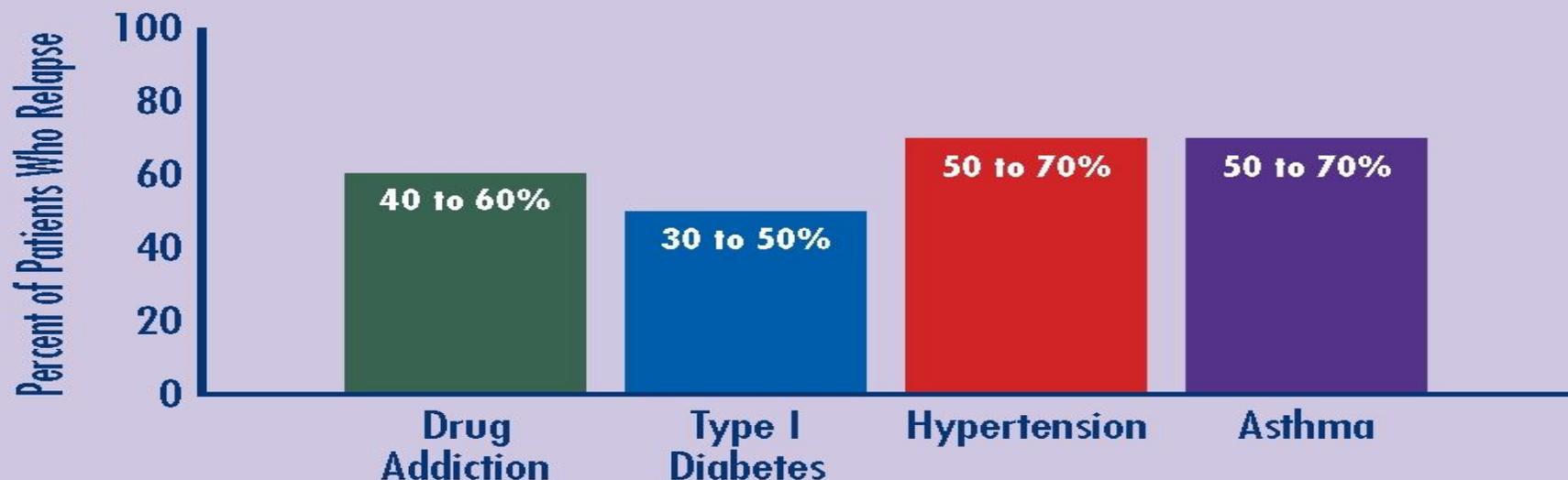


Relapse and Recycling

- Relapse shouldn't be seen as a problem of substance use or substance use disorders - relapse and recycling are a **natural part of the process** of behavior change.
- Most successful changers make **repeated efforts** to get it right that are part of a learning process to correct for inadequate completion of stage tasks.



COMPARISON OF RELAPSE RATES BETWEEN DRUG ADDICTION AND OTHER CHRONIC ILLNESSES



Relapse rates for drug-addicted patients are compared with those suffering from diabetes, hypertension, and asthma. Relapse is common and similar across these illnesses (as is adherence to medication). Thus, drug addiction should be treated like any other chronic illness, with relapse serving as a trigger for renewed intervention.

Source: McLellan et al., JAMA, 2000.

What types of support help people change?

Keys to Successful Recycling

- Persistent efforts
- Repeated attempts
- Helping individuals take the *next step*
- Enhance motivation and support self-efficacy
- Support for impaired executive functioning
- Match intervention to current stage of change

Examples of support

- Housing stability
- Employment status
- Family connection
- Self-worth
- Personal freedom

Regrounding Our Response with the Stages of Change

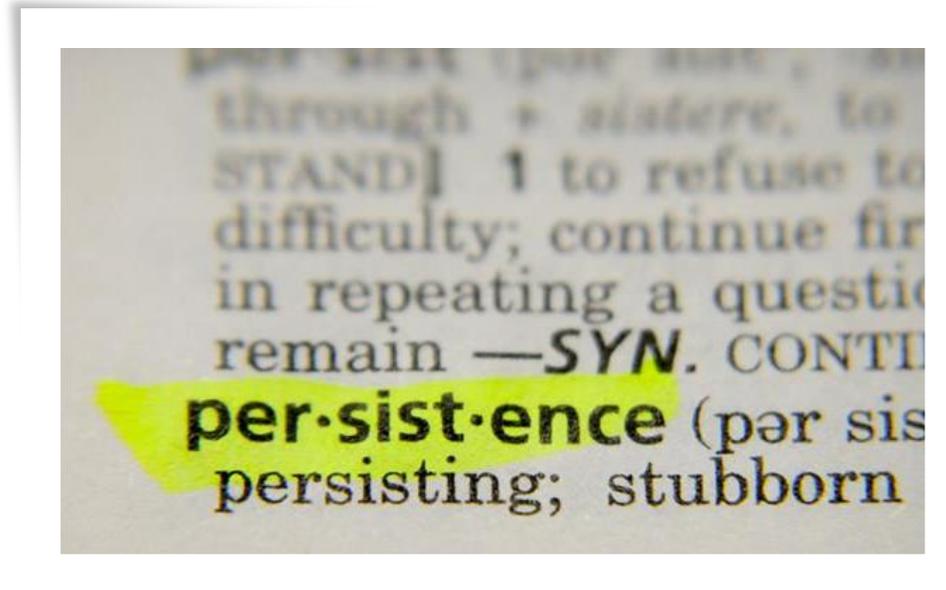
Concluding Thoughts

Helping Change Happen

- Understand that change is a **difficult, complex process**.
- Identify where a person is in the change process, and how harm reduction strategies may provide support and build self-efficacy.
- Have conversations about change, focusing on important personal values and the possibility of change.
- People living with brain injuries may require additional external or environmental supports to support change.

Helping Change Happen

- Help to identify and address current challenges and barriers.
- Keep in mind that supporting the individual's change process requires:
 - Patience
 - Persistence
 - Optimism
 - Realism



Questions?

Thank you!

Please fill out our evaluation:

<https://bit.ly/ROReval>