

Integrated Dual Disorders Treatment

“Stages of Change and Stages of Treatment”

Adapted from materials found at www.ohiosamickoe.case.edu

Stage of Change	Stage of Treatment	Clinical Focus
Pre-Contemplation	Engagement	<p>Outreach</p> <ul style="list-style-type: none"> ■ Provide outreach in community-based settings <p>Trusting Relationship</p> <ul style="list-style-type: none"> ■ Gain permission from consumers to share in their process of change ■ Ask what is important to consumers; Listen to and respect their priorities ■ Get to know the person for who they are <p>Practical Support</p> <ul style="list-style-type: none"> ■ Provide daily living support (food, clothing, housing, medicine, safety, crisis intervention) <p>Assessment</p> <ul style="list-style-type: none"> ■ Assess continuously for personal histories, goals, and readiness-to-change
Contemplation & Preparation	Persuasion (Early & Late)	<p>Motivational Interventions</p> <ul style="list-style-type: none"> ■ Commit yourself to understanding consumers' goals ■ Help consumers understand the pros and cons of personal change ■ Help develop discrepancy between goals and lifestyles ■ Help consumers begin to reduce substance use & take medications ■ Help consumers recognize & take pride in their strengths and successes <p>Ambivalence is Normal</p> <ul style="list-style-type: none"> ■ Assure consumers that ambivalence to change is a normal human response (change may occur slowly over time) <p>Pay-Off Matrix</p> <ul style="list-style-type: none"> ■ Use a pay-off matrix to help consumers tip their decisions away from ambivalence and toward positive action <p>Education</p> <ul style="list-style-type: none"> ■ Teach consumers about alcohol, drugs, mental illness, and activities that promote health and wellness ■ Offer skills-training opportunities ■ Reach out and provide education and support to families
Action	Active Treatment (Early & Late)	<p>Skill Building</p> <ul style="list-style-type: none"> ■ Teach illness management skills for both disorders (e.g., refusal skills, managing triggers and cravings, recognizing symptom onset, communication skills, etc.) <p>Social Support</p> <ul style="list-style-type: none"> ■ Encourage positive peer supports (e.g., self-help groups) <p>Cognitive Behavioral Interventions</p> <ul style="list-style-type: none"> ■ Assist consumers with transforming negative thoughts and behaviors into coping skills for both disorders
Maintenance	Relapse Prevention	<p>Planning</p> <ul style="list-style-type: none"> ■ Develop a Relapse-Prevention Plan ■ Support consumers to maintain lifestyle changes learned in active treatment <p>Recovery Lifestyle</p> <ul style="list-style-type: none"> ■ Help consumers set new goals for enhancing their quality of life <p>Social Support</p> <ul style="list-style-type: none"> ■ Reduce the frequency, intensity, and duration of relapses by increasing positive peer relationships and supportive clinical relationships

See also: Kim T. Mueser, Douglas L. Noordsy, Robert E. Drake, and Lindy Fox (2003). *Integrated Treatment for Dual Disorders: A Guide to Effective Practice*. New York: The Guilford Press.

Gerard J. Connors, Dennis M. Donovan, and Carlo C. DiClemente (2001). *Substance Abuse Treatment and the Stages of Change: Selecting and Planning Interventions*. New York: The Guilford Press.