

## **Stages of Change, Motivation, Choices & Working Through Ambivalence**

**EVIDENCE BASED PRACTICES (EBP):** Integrated System of Care; Universal Dual Diagnosis Capabilities; Principles of Empathy and Hope; Motivational Interviewing Approach; Stages of Change Model Design; Strength Based; Skill Building; Solution Focused; Neurochemistry Based Disorders of the Brain; Symptom Identification; Symptom Management; EBP Curriculum Topics , i.e. Nutrition, Stress Management, Cognitive Behavioral, and more

### **Consistency in the Group Setting**

The importance of *consistency* in a treatment setting can't be overstated. This is especially true when people are placed in vulnerable situations. *Inconsistency* can, at best, increase uncertainty and insecurity for the person receiving services. At worst, unpredictability can create a sense of helplessness while simultaneously decreasing a person's development of self-reliance. In fact, all human beings benefit from a dependable approach in the treatment of chronic disorders. When a person learns they can rely on consistency, they are less stressed and more relaxed. Consistency in the group setting includes the group structure, psychoeducational material, and the approach.

Each agency or facility will have different requirements – such as group receipts or paperwork – however, consistency can still include a structure similar to the following:

1. Group members pick up: a. Clip Board, b. Paper, and c. Pencil/Pen as they enter the room.
2. Group facilitator picks up the group receipts from each person in the group, and/or the group facilitator passes out the sign-in sheet for the group members to sign.
3. Group facilitator provides a Positive Group Beginning, Consistent Psychoeducational Material, Consistent Approach, and a Positive Group Closure.

### **Psychoeducational Groups and Crisis Event Processing (when requested)**

#### **Notes to Facilitator(s):**

1. *THE BASICS, Second Edition* meets the definitions and goals of Psychoeducational Groups, Skill Building Groups, and Cognitive Behavioral Groups.
2. Group participants who have become accustomed to Interpersonal Processing Groups – as well as staff who have facilitated them – may find it a challenge to now facilitate Psychoeducational Groups.
3. Likewise, facilitators who may have followed a more lecture-style education presentation, may find it challenging to now devote at least 1/3<sup>rd</sup> of group time to specific topic discussions and interactions.
4. Both types of groups (Interpersonal Processing Groups and Psychoeducational Groups) are extremely important, yet each has different goals and structure.
5. The structure of Psychoeducational Groups, Skill Building Groups, and/or Cognitive-Behavioral Groups in no way means that there will not be *interaction* – far from it. It just means that the interactions, discussions, and exercises will be about the topic(s) of each group.
6. Facilitators *may* – or not – still want to allow time in each group for the group member(s) to discuss a crisis that may have occurred since the last group.
7. We do know, of course, that *every* person in group is typically experiencing many challenges each and every week; however, most of these incidents are often best resolved in ways other than group time where the event does not pertain to every group member.
8. Suggested responses to a challenge, problem, or crisis can also include suggesting the person contact their primary care provider; schedule a 1:1 appointment; reschedule their next 1:1 to an earlier time; or, meet with the facilitator after group to explore options and develop a plan.
9. A facilitator would, of course, not “*grade*” an event as being worthy or not for group time. If a person requests individual time in the group, then that would be accepted as valid and time allotted at the end of the group.
10. Over time, the group begins to understand the differences between a situation, a challenge, a problem, or a crisis and can make decisions to utilize group time or continue with the current psychoeducational topic.

### **Prepare Professionals**

Suggestions for professionals to prepare themselves for group typically includes:

1. Review all content material, appendices, and/or handouts *prior* to group to avoid a lecturing style.
2. Decide beforehand the *key points* to be covered in each group to produce flexibility for group responses, discussions, or questions.
3. Gain an overall understanding of the content so summarizing is possible in order to create an interactive facilitation style.
4. Determine the group structure to achieve the essential balance between education and discussions.
5. Check group room to be sure there are enough clipboards, pencils or pens, and markers or chalk for the board.
6. Make enough copies of any handouts *before* group.
7. Write any group content on the board *prior* to the beginning of group whenever possible.

## Master Guide & Master Tips to Professionals

Note: *The Master Guide* (located at the beginning of Volume I & II) and the *Master Tips to Professionals* (located at the back of Volume I) have many topics to assist in the group process like Master Tip #39: Suggestions For Managing Handouts For Groups (pages Master Tips 64-67). Other tips include:

1. Master Guide: Interactive Style (pages Master Guide 10-11)
2. Master Tip #1: Suggestions for Beginning Group (pages Master Tips 1-4)
3. Master Tip #3: Empathetic Treatment Approach (pages Master Tips 7-9)
4. Master Tip #4: Promoting Hope (page Master Tips 9)
5. Master Tip #5: Maintaining a Consistent, Nonjudgmental, and Positive Attitude (pages Master Tips 10-13)
6. Master Tip #12: Responding to Requests for Copies of APPENDICES (pages Master Tips 27-29)
7. Master Tip #13: Depth of Psychoeducational Content (pages Master Tips 29-30)
8. Master Tip #14: Group Closure Suggestions (pages Master Tips 30-31)
9. Master Tip #16: Motivational Interviewing (pages Master Tips 31-32)

### Present Curriculum/Topic

1. It is extremely important that each group participant leave every group with more Psychoeducation than they came in with – which may also include discussing a “familiar topic” yet with a “present-day” focus. Psychoeducational Groups are designed to provide education about all areas related to the management of Substance Use Disorders and Psychiatric Disorders. Psychoeducational Groups are not Interpersonal Processing Groups – even though interaction and processing the particular *psychoeducational topic(s)* is essential to individualizing the topic(s) or skill(s) presented.
2. It is recommended that a minimum of 1/3<sup>rd</sup> of group time be devoted to interaction (therapeutic counseling *topic* discussions). This can be accomplished – depending on the individual style of the group facilitator(s) – by any “present education-interact/discuss – present education-interact/discuss” combination while still structuring the group to include the curriculum/topic education to be covered.
3. The presentation of material will, of course, be modified by the facilitator to match the functioning skills of group participants. It is important to note, however, that *THE BASICS, Second Edition* was written in a conversational language while taking into consideration a wide-range of symptom acuity and severity. Persons with co-occurring psychiatric and substance disorders benefit from learning about their disorders and how to manage them, as do all individuals with any chronic disorder(s). Each group participant will retain what is meaningful to them at the present time.

### Group Beginning Suggestions

A positive group beginning (and ending) is extremely important. There are many ways to begin (and end) a group in a positive way. Suggestions to choose from can include:

1. Reading the Thought For The Day from a meditation book. (Note: Meditation books that also contain an index at the end of the book – such as *Easy Does It* – are helpful in choosing a specific reading that matches the topic(s) presented in group like Self-Esteem.), *or*
2. Reading an inspirational or humorous curriculum handout from *THE BASICS, Second Edition*, *or*
3. Practicing a deep breathing or a stretching exercise, *or*
4. Sharing of one thing that each person is grateful for today, *or*
5. Sharing of one positive thing that he/she did that contributed to their recovery in the past few days, *or*
6. Reading an AA Slogan with a brief explanation or AA/NA/Dual Recovery inspirational reading.

\* Recommended Beginning: Breathing Exercise (located on page Master Tips 3)

### Practice Curriculum/Topic

Practicing subject material is the best way participants can internalize and personalize the curriculum content. Practice includes the group interactions, worksheets, exercises, handouts, and content discussions.

## Stages of Change, Motivation, Choices & Working Through Ambivalence Volume I; Pages: Subject 1-28 – 1-37

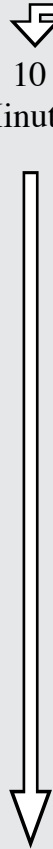
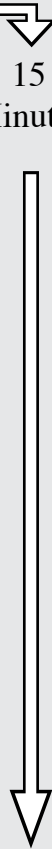
Based on a 2-Hour group: Two 50-Minute Segments	Time-Frame
Group Beginning and Prepare Group	20 Minutes Total
Positive group beginning (suggestions are located on the previous page).	5 Minutes
<ol style="list-style-type: none"> <li>1. Brief Group Introductions: (Note: The <i>interactions</i> in a psychoeducational group are discussions about the <i>topics</i>, not interpersonal processing or case management questions which do not apply to the entire group.)                             <ol style="list-style-type: none"> <li>a. Ask the group members to tell the group their name.</li> <li>b. Welcome any group members who are new to this group or phase.</li> </ol> </li> <li>2. Crisis Processing (when requested and optional):                             <ol style="list-style-type: none"> <li>a. Ask the group if anyone has experienced a crisis since their last group, and if they need/want additional time in this group to discuss it, i.e. what happened, how they managed the crisis, and/or explore options and develop a plan.</li> <li>b. Let the person(s) know that you will allow time at the end of this group for them to share their experience and receive support from their fellow group members.</li> </ol> </li> </ol>	10 Minutes 
<p><u>Introduction of the Group Topic and Why It's Important (page Subject 1-28):</u>                      Change is rarely something a person does willingly. It's human nature that doing things in a certain way becomes comfortable. A person tends to choose the familiar over the <i>unfamiliar</i> or the known over the <i>unknown</i>. Even when a person is doing things that aren't healthy, they are at least familiar. Today we will discuss how people change behaviors, the stages of change, barriers to change, and how a person works through ambivalence which ultimately assists in the change process.</p>	5 Minutes 

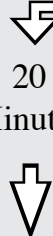
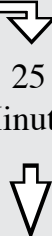
Psychoeducation Part I: Topics & Focus	Pages & Location	Presentation Suggestions	Time-Frame										
How People Change Behaviors	Subject 1-28 – 1-29	Summarize two remaining brief paragraphs under this heading.	30 Minutes										
Stages of Change	Subject 1-28 – 1-29	<ol style="list-style-type: none"> <li>1. Summarize the paragraph.</li> <li>2. Define the stages of change located in the table below:</li> </ol>											
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 10%;">1</td> <td style="width: 30%;">Pre-contemplation</td> <td style="width: 10%;">2</td> <td style="width: 30%;">Contemplation</td> <td style="width: 10%;">3</td> <td style="width: 30%;">Preparation</td> <td style="width: 10%;">4</td> <td style="width: 30%;">Action</td> <td style="width: 10%;">5</td> <td style="width: 30%;">Maintenance</td> </tr> </table>			1	Pre-contemplation	2	Contemplation	3	Preparation	4	Action	5	Maintenance	
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<b>Psychoeducation Part I: Topics &amp; Focus (continued)</b>	<b>Pages &amp; Location</b>	<b>Presentation Suggestions</b>	<b>Time-Frame</b>
The Spiraling Pattern of Change	Subject 1-29 – 1-30	1. Summarize one paragraph. 2. Illustrate the graphic below: (Note: Knowing the spiraling pattern of change helps a person understand why they can feel ready to change one day and then think completely different the next day – or even the next hour.)	30 Minutes
Different Stages of Change at The Same Time	Subject 1-30	Summarize two paragraphs.	
Discomfort and Mistakes Can Lead to Change	Subject 1-30 – 1-31	Summarize four brief paragraphs.	
Depression and Anxiety Can Help Lead to Change	Subject 1-31	Summarize one brief paragraph.	
Barriers to Change	Subject 1-31	Summarize one line.	
Old Attitudes and Beliefs	Subject 1-31	Summarize one brief paragraph.	
Difficulty in Relating to Later Stage Symptoms	Subject 1-31	Summarize two paragraphs.	
<b>Break</b>			<b>10 Minutes</b>

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<b>Psychoeducation Part II: Topics &amp; Focus</b>	<b>Pages &amp; Location</b>	<b>Presentation Suggestions</b>	<b>Time-Frame with Crisis Processing</b>	<b>Time-Frame without Crisis Processing</b>		
The “Yeah Buts”	Subject 1-32	Summarize one brief paragraph.				
The “Yets”	Subject 1-32	Summarize two brief paragraphs.			10 Minutes	15 Minutes
The “I’m Really, Really Going to Try... <i>Really</i> ” Syndrome	Subject 1-32	Summarize one brief paragraph.				
Putting Off Making a Decision for Change	Subject 1-32 – 1-33	Summarize three paragraphs.				
Not Putting The “Action” Into Change	Subject 1-33	Summarize two paragraphs.				
Discounting or Finding a “Reason” to Leave Treatment	Subject 1-33	Summarize two paragraphs.				
Trying To Do It “Perfectly”	Subject 1-34	Summarize three paragraphs.				
Change Takes Practice and Occurs From The Inside - Out	Subject 1-34	Summarize two paragraphs.				
Motivation and Working Though Ambivalence	Subject 1-34 – 1-35	Only summarize three paragraphs at this time.				
Personal Motives	Subject 1-36	1. Summarize information in the table. 2. Summarize four paragraphs.				
Choices	Subject 1-37	1. Summarize four paragraphs. 2. Summarize the examples in the table.				

<b>Skill Building Exercise and Discussion Suggestions</b>	<b>Time-Frame with Crisis Processing</b>	<b>Time-Frame without Crisis Processing</b>
<p><b><u>To Facilitator(s):</u></b></p> <ol style="list-style-type: none"> <li>It is recommended that any group content for this particular group be written on the board <i>prior</i> to the beginning of group whenever possible.</li> <li>Illustrate the scale of “Weighing the <i>I Want To</i> and the <i>I Don’t Want To</i>” for the group (page Subject 1-35).</li> <li>Explain by giving either the examples from the text or choose examples of your own.</li> </ol>	 20 Minutes	 25 Minutes


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**Skill Building Exercise and Discussion Suggestions**

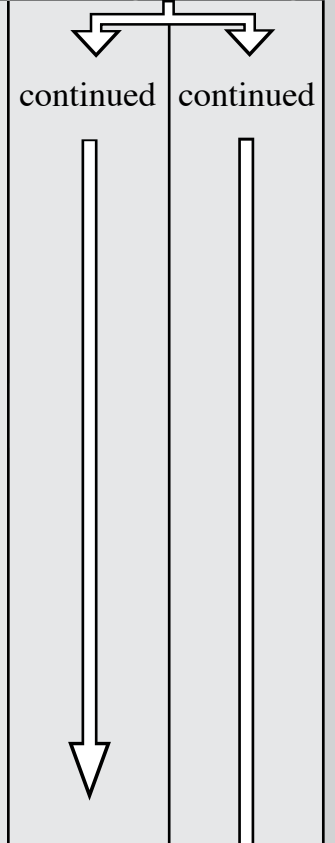
Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
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**To the Group:**

- Using the scale (see below) of “*I Want To – But I Don’t Want To*” what are the reasons you would *want* to make a specific behavior change?
- What are the reasons you would *not want* to make this same behavior change at this time?

<b>“I Want To” Finding Personal Reasons to Change</b>		<b>“But I Don’t Want To” Reasons I Don’t Want to Change</b>
What images come to mind when you think about having a better life without alcohol and drugs, or making changes to reduce psychiatric symptoms?		I’m afraid to really try to quit using or begin treatment for a psychiatric disorder because I might fail.
How would quitting substance abuse or working a program of recovery for psychiatric and substance disorders pay off immediately in your relationships?		I think the positive effects I get from substances outweigh the negative effects, even though they worsen my psychiatric symptoms.
What is missing in your life because of not getting treatment for a Psychiatric or Substance Disorder?		I’m not convinced my life will be better without alcohol and drugs.
What other new possibilities might open up in your life if you no longer used alcohol and drugs?		I know I won’t have any fun ever again if I quit using substances.

- What other changes does each group member recognize that they have “*I Want To – But I Don’t Want To*” thoughts about at this time?



**Crisis Processing**

- Ask the group member(s) to tell the group what happened.
- Explore options and/or develop an immediate plan for coping.
- Allow the group to offer support.

**Time-Frame**  
10  
Minutes

**Group “Paper Work”**

Group participants fill out Group Evaluations.

**Time-Frame**  
5  
Minutes

**Group Closure**

- Ask each group member what they learned about themselves or behavior change in the group today?, *or*
- Ask each group member how they will use the weighing scale of “*I Want To – But I Don’t Want To*”?, *or*
- Use an inspirational reading or positive closure of your choice.

**Time-Frame**  
5  
Minutes