



The Transtheoretical Model of Change

Patients may be at any of these stages when approached about their health behavior change. Most will cycle through these stages, potentially over several years, as they prepare to change. It is important to praise any efforts by the patient to move in a healthier direction. By encouraging patients to move to the next stage of change instead of trying to get them to change the behavior completely during one visit, patients will be more successful with long-term health behavior changes. Motivational interviewing techniques are most effective in guiding these discussions. If you encounter patient resistance, you may need to move back to an earlier stage reflecting both empathy and hope during the conversation.



Maintenance

When efforts are made to prevent relapse and consolidate gains made during the action phase. This will begin six months into the action stage and will continue indefinitely. The main goal is stabilizing the behavior to make it a lasting change.

Action

When behavior is modified to reduce the risk for potential poor health outcomes. This is the most noticeable stage with the most outward rewards. The behavior will be improved for one day to six months. The patient may talk about working hard to change.

Preparation

When there is intended action to change the behavior within the next month, but prior attempts within the past year have been unsuccessful. You will likely observe small behavioral changes with decision-making happening to support the effort.

Contemplation

When there is an acknowledgment of the problem and serious consideration about how to overcome it but no commitment to do anything about it. This is often accompanied by “yes, but” statements. The patient wants to change, but they just are not ready yet. Thoughts may include considering the benefits and challenges associated with changing the behavior. They are serious about changing the behavior and are considering resolutions.

Pre-Contemplation

When there is no intention to change behavior in the foreseeable future. This patient may wish to change and may even change under pressure from family, friends, coworkers and others in their community. Once the pressure is removed, they may return to their previous habits. Patients may resist accepting that their health behavior may lead to poor health outcomes and needs to be modified.

References: Prochaska JO, DiClementa CC, Norcross, JC. In Search of How People Change: Applications to Addictive Behaviors. *Am Psychologist*. 47(9):1102-1114. Zimmerman GL, Olsen, CG, Bosworth, MF. A 'Stages of Change' Approach to Helping Patients Change Behavior. *Am Fam Physician*. 2000;61(5):1409-1416. Last edited September 30, 2020. This publication is printed by the Oklahoma Health Care Authority as authorized by Title VI and Title VII of the 1964 Civil Rights Act and the Rehabilitation Act of 1973. Copies have been deposited with the Publications Clearinghouse of the Oklahoma Department of Libraries. [74 O.S.2001 § 3105 (C)] ENG-TSETCHNG-2019



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